

MATERIAL REVIEWED AT CIA HEADQUARTERS BY  
HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF MEMBERS

FILE TITLE/NUMBER/VOLUME: Hidalgo, S.A.  
OF FILE

**INCLUSIVE DATES:**

**CUSTODIAL UNIT/LOCATION:**

**ROOM:** \_\_\_\_\_

DELETIONS, IF ANY: PERSONAL MATERIAL & SENSITIVE OPS

NO DOCUMENTS MAY BE COPIED OR REMOVED FROM THIS FILE

14-00000

Personal - Post agency  
activity

SECRET

REQUEST FOR PERSONNEL ACTION										DATE PREPARED					
1 SERIAL NUMBER 027630		2 NAME (Last-First-Middle) HIDALCO, BARTHOLOME N. JR.		3 NATURE OF PERSONNEL ACTION RETIREMENT (DISABILITY) UNDER CIA RETIREMENT DISABILITY SYSTEM		4 EFFECTIVE DATE REQUESTED 02 28 70		5 CATEGORY OF EMPLOYMENT REGULAR							
6 FUNDS X		7 FINANCIAL ANALYSIS NO: CHARGEABLE 0235 0620		8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 87-343 PL 87-343		9 ORGANIZATIONAL DESIGNATION DDP/WH BRANCH 2 PANAMA SECTION									
10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.		11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER 1318		13 CAREER SERVICE DESIGNATION D.									
14 CLASSIFICATION SCHEDULE (GS, ETC.) GS		15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 12 5		17 SALARY OR RATE \$15,173									
18 REMARKS SUBJECT HAS SIGNED WAIVER FOR SICK AND ANNUAL LEAVE ACCUMULATING AFTER 28 FEBRUARY 1970.  NOT Recommended for Agency Reserve Program due to Health of Subject in 13. Date 1/26/70 U.H./PGS															
EXCERPT															
19 BIA SIGNATURE OF REQUESTING OFFICIAL HENRY L. BERTHOLD, CASH/PERS				20 DATE SIGNED 2-27-70		21 FEI SIGNATURE OF CAREER SERVICE APPROVING OFFICER Pete M. Yancy				22 DATE SIGNED 2-27-70					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
23 ACTION CODE 45 10		24 DATE CODING NUMERIC ALPHABETIC		25 STATION CODE CODE		26 INTEGRIS CODE CODE		27 MOISER CODE CODE		28 DATE OF BIRTH MO DA YE		29 DATE OF GRADE MO DA YE		30 DATE OF LEI MO DA YE	
29 DATE OF BIRTH MO DA YE		31 SEPARATION DATA CODE 1-CSC 2-DRGA 3-FICA 4-RATE		32 SEPARATION DATA CODE CODE		33 CORRECTION CANCELLATION DATA TYPE		34 SECURITY REG NO CODE		35 SECURE REG NO		36 SECURE REG NO			
35 RET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36 GIN COMP DATE MO DA YE		37 LONG LUMP DATE MO DA YE		38 CAREER CATEGORY TAR DISB MOV TEMP		39 FEGIT HEALTH INSURANCE CODE		40 SOCIAL SECURITY NO CODE		41 STATE TAX DATA CODE			
42 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LES THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		43 LEAVE CAT CODE		44 FEDERAL TAX DATA FORM EXECUTED 1-PHS 2-RC		45 NO TAX EXEMPTIONS CODE		46 FORM EXECUTED 1-YE 2-NO		47 STATE TAX DATA CODE		48 NO TAX EXEMPT CODE			
49 C.P. APPROVAL Signature: [Signature] Date: [Signature]															
50 DATE APPROVED 3/1/70															
51 GROUP 1 EXCLUDED FROM ALL CIA PAYROLLS AND RELATED ACTIVITIES															

SECRET

## EMPLOYEE NOTICE OF RESIGNATION

RESIGN EFFECTIVE <i>(Date)</i>	FOR THE FOLLOWING REASON <i>Mar 2 1970</i>													
MY LAST WORKING DAY WILL BE—	DATE SIGNED	SIGNATURE OF EMPLOYEE												
FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code) <i>403 Silver Rock Rd. Rockville, Maryland 20851</i>														
INSTRUCTIONS														
<p>Items 1 thru 7, and Items 9 thru 18a — The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains <i>only</i> to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.</p> <p>Item 5 — "Category of Employment" should show one of the following entries:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Regular</td> <td style="width: 33%;">Summer</td> <td style="width: 33%;">WAE</td> </tr> <tr> <td>Part Time</td> <td>Detail Out</td> <td>Consultant</td> </tr> <tr> <td>Temporary</td> <td>Detail In</td> <td>Military</td> </tr> <tr> <td colspan="3">Temporary-Part Time</td> </tr> </table> <p>Item 9 — "Organizational Designations" should show <i>all</i> levels of organization pertinent to identifying the location of the position:</p> <p><input checked="" type="checkbox"/> Major Component (<i>Director, Deputy Director, etc.</i>)  <input type="checkbox"/> Office, Major Staff, etc.</p> <p><input type="checkbox"/> Foreign Field or U.S. Field (<i>if pertinent</i>)  <input type="checkbox"/> Division or Staff (<i>subordinate to first line</i>)  <input type="checkbox"/> Branch  <input type="checkbox"/> Section  <input type="checkbox"/> Unit</p> <p>Items 11 and 15 — "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or form 261, Staffing Complement Change Authorization, explain under Item 18—Remarks.</p> <p>Item 18b — Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, <i>the gaming Career Service should approve</i> and the other Career Service should concur in Item 18, Remarks.</p> <p><b>ROUTING</b>— The original only of this form will be forwarded to the Office of Personnel through the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1, which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.</p>			Regular	Summer	WAE	Part Time	Detail Out	Consultant	Temporary	Detail In	Military	Temporary-Part Time		
Regular	Summer	WAE												
Part Time	Detail Out	Consultant												
Temporary	Detail In	Military												
Temporary-Part Time														

SECRET

14-00000

MEDICAL

25 JUL 1969

**MEMORANDUM FOR: Mr. Balmes N. Hidalgo, Jr.****SUBJECT : Exceptional Service Emblem**

1. Your request for consideration to receive the Exceptional Service Emblem has been reviewed by this office to determine your eligibility for the award. With considerable regret, I must concur in the assessment that the injuries you suffered in the line of duty do not fall under the special criteria governing award of the Exceptional Service Emblem. Hazardous duties, in the meaning of the governing regulation, relate to duties performed in areas in which internal strife, civil disturbances or hostile action by armed forces or persons unfriendly to the United States were present at the time the injury was incurred, or, relate to duties performed in an assignment defined as hazardous due to unusual geographic or other natural conditions.

2. You may be sure that this decision has been based upon thoughtful deliberation. Please accept my personal thanks for a job well done under difficult conditions.

Robert S. Wattles  
Robert S. Wattles  
Director of Personnel

**Distribution:**

- 0 - Addressee
- 1 - C/WH/Pers
- 1 - OPF/Hidalgo
- 1 - D/Pers
- 2 - BCD/HMAB

S E C R E T

24 June 1969

MEMORANDUM FOR: Balmer N. Hidalgo

VIA : WH/RMO

SUBJECT : Records Officer Appointment

1. In accordance with a request received from your component, you are hereby appointed a Records Officer in the Clandestine Services. Your functions are described, in summary, in CSI 70-1, Para. 4.d. You have also participated in a training course in which these functions were reviewed in some detail.

2. The essence of your appointment is that you now occupy a position of trust in which you are expected to draw on your knowledge and experience to exercise responsible and sound judgment in building and maintaining a professionally useful records system in the Clandestine Services. You are, at the same time, expected to train and guide others within your component in these respects.

3. A copy of this memorandum will be placed in your official personnel folder.

*E. Marelius*  
EDWARD A. MARELIUS  
DDP Records Management Officer

cc: Personnel File of Addressee

S E C R E T

GROUP I  
Excluded from automatic  
downgrading and  
declassification

14-00000

SENSITIVE OPERATIONALS  
1968

SECRET

6-38

REQUEST FOR PERSONNEL ACTION								DATE PREPARED	
1. SERIAL NUMBER		2. NAME (Last - First - Middle)						10 August 1966	
027630		HIDALGO, LAMARO N., JR.							
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE REQUESTED						5. CATEGORY OF EMPLOYMENT	
DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM		MONTH DAY YEAR 08 14 66						REGULAR	
6. FUNDS		X	V TO V	V TO C	7. COST CENTER NO CHARGEABLE			8. LEGAL AUTHORITY (Completed by Office of Personnel)	
		C P TO V	C P TO C		7235-0620			PL 88-643 Sect. 203	
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION							
DDP/WB		WASHINGTON, D.C.							
11. POSITION TITLE		12. POSITION NUMBER			13. CAREER SERVICE DESIGNATION				
					D				
14. CLASSIFICATION SCHEDULE (GS / E. RA.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
				12		8			
18. REMARKS YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE PROVISIONS OF HR 20-50. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.									
18A. SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			DATE SIGNED
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC	22. STATION CODE ALPHABETIC	23. INTEGRATE CODE	24. MOONRS CODE	25. DATE OF BIRTH MO DA YE	26. DATE OF GRADE MO DA YE	27. DATE OF LEI MO DA YE	
28. RTE EXPIRES MO DA YE	29. SPECIAL REFERENCE 1-15 2-16A 3-NONE	30. RETIREMENT DATA CODE 2	31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE MO DA YE	EOD DATA			33. SECURITY REG RD	34. SEA
35. VET PREFERENCE CODE 0-HOME 1-1 PT 2-10 PT	36. SERV COMP DATE MO DA YE	37. LONG COMP DATE MO DA YE	38. CAREER CATEGORY CAB RESV PROV-TEMP	39. FED/HEALTH INSURANCE CODE 0-WAIVED 1-YES	40. SOCIAL SECURITY NO				
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-100, BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 2 YEARS) 3-BREAK IN SERVICE (MORE THAN 2 YEARS)	42. LEAVE CAT CODE	43. FEDERAL TAX DATA CODE 1-755 2-80	44. STATE TAX DATA CODE 1-YES 2-NO	45. NO. TAX EXEMPTIONS CODE 1-1 2-2	46. DATE APPROVED				
47. POSITION CONTROL CERTIFICATION P-16-6411				See memo signed by D/Pers dated 26 JUL 1966					

SECRET

DATE PREPARED

TO DECEMBER 1965

## REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER <b>027630</b>		2. NAME / GRADE / PAY GRADE / PAY RATE <b>HIDALGO, BALTES N.</b>		3. DATE OF PERSONNEL ACTION <b>REASSIGNMENT</b>		4. PAY RATE/CHARGE <b>REGULAR</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>		
6. PAY GRADE <b>X</b>		7. PAY RATE <b>0 TO V</b>		8. PAY GRADE <b>V TO G</b>		9. PAY RATE <b>0 TO G</b>		10. PAY RATE <b>REGULAR</b>		
11. ORGANIZATIONAL DESIGNATIONS <b>DOP/WH BRANCH 2 PANAMA SECTION</b>		12. LOCATION OF OFFICIAL STATION <b>WASHINGTON, D. C.</b>		13. POSITION TITLE <b>OPS OFFICER</b>		14. POSITION NUMBER <b>(GS-12)</b>		15. CAREER SERVICE DESIGNATION <b>D</b>		
16. CLASSIFICATION SCHEDULE / GS. / R. / M. <b>GS</b>		17. OCCUPATIONAL SERIES <b>0136.01</b>		18. GRADE AND STEP <b>12 - 2</b>		19. SALARY OR RATE <b>3-10,987</b>		20. REMARKS <b>FROM: WH/C/MIAMI OPS BR/FI SECTION/5235 - 1162/1145/WASHINGTON, D. C.</b>		
<b>Recorded by CSPD Sgt</b>										
<b>1 - FINANCE</b>										
18A. SIGNATURE OF REQUESTING OFFICIAL <b>ROBERT D. CASHMAN C/WH/PERSONNEL</b>		18B. DATE SIGNED <b>10 Dec 65</b>		18C. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <b>M. Miller</b>		18D. DATE SIGNED				
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE <b>37/16</b>	20. EMPLOYEE CODE <b>57-130</b>	21. OFFICE CODING <b>004 22012</b>	22. STATE CODE <b>CODE</b>	23. INTEGRATE CODE <b>CODE</b>	24. ROUTE CODE <b>CODE</b>	25. DATE OF BIRTH <b>MO DA YE</b>	26. DATE OF GRADE <b>MO DA YE</b>	27. DATE OF LEI <b>MO DA YE</b>		
28. SITE EXPIRES <b>MO DA YE</b>	29. SPECIAL REFERENCE <b>1-CRA 3-FICA 5-GOME</b>	30. RETIREMENT DATA <b>CODE</b>	31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA <b>CODE</b>		33. SECURITY REG. # <b>EOD DATA</b>	34. SET			
35. VET PREFERENCE <b>CODE</b>	36. SERV. COMP. DATE <b>MO DA YE</b>	37. LONG COMP. DATE <b>MO DA YE</b>	38. LEARN. EXTENSION <b>CODE</b>	39. MEDICAL INSURANCE <b>CODE</b>	40. MEDICAL INSURANCE <b>CODE</b>	41. SOCIAL SECURITY NO. <b>CODE</b>				
42. PREVIOUS GOVERNMENT SERVICE DATA <b>CODE</b>	43. LEAVE CAT <b>CODE</b>	44. FEDERAL TAX DATA <b>CODE</b>	45. STATE TAX DATA <b>CODE</b>	46. NO TAX EXEMPTIONS <b>1-YES 2-NO</b>	47. NO TAX EXEMPTED <b>1-YES 2-NO</b>	48. NO TAX STATE CODE <b>CODE</b>	49. NO TAX STATE CODE <b>CODE</b>	50. NO TAX STATE CODE <b>CODE</b>		
51. POSITION CONTROL CERTIFICATION <b>SECRET</b>					52. C.P. APPROVAL <b>SECRET</b>					53. DATE APPROVED <b>12/15/65</b>

**CONFIDENTIAL**

(When Filled In)

**NOTICE OF LONGEVITY COMPUTATION DATE**

NAME (Last, First, Middle)

**HIDALGO B. N. Jr.**

OFFICE (and division)

**DDP/ WH**

VOUCHERED

UNVOUCHERED

SERIAL NUMBER:

**07630**

ORIGINAL	LONGEVITY COMPUTATION DATE
<input checked="" type="checkbox"/> CORRECTION	02-18-572
THIS DATE:	SIGNATURE (Office of Personnel)
<b>12-13-65</b>	<i>J. C. Bellard</i>

FORM 171a  
11-68**CONFIDENTIAL**

(62)

-SECRET

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SECRET

DATE PREPARED

24-AUG-64

## REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER 02737		2. NAME (Last-First-Middle) FALLO, B. N.		3. NATURE OF PERSONNEL ACTION <b>EXECUTED APPOINTMENT (Contract)</b>		4. EFFECTIVE DATE REQUESTED BORN DAY MONTH 24 12 1964		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS X PDS		V TOV CP TOV	V TOO CP TOO	7. COST CENTER NO CHARGE AMT 4232-1000-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS EOP Special Affairs Staff OS/OS Development Complement				10. LOCATION OF OFFICIAL STATION Washington, D.C.					
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 1337		13. CAREER SERVICE DESIGNATION L					
14. CLASSIFICATION SCHEDULE (G.S., F.B., etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 (1)		17. SALARY OR RATE \$970		Recorded by CSTD NMR	
18. REMARKS *For medical reasons. Not to exceed one year. For duration of period that the individual is on sick leave; not to exceed one year. Pushing for CSCS									
19A. SIGNATURE OF REQUESTING OFFICER George L. Jackson		DATE SIGNED 13 Aug 64		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER George L. Jackson		DATE SIGNED 13 Aug 64			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
20. ACTION CODE 13	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC 44997	22. STATION CODE ALPHABETIC SAS	23. INTEGEE CODE CODE 75013	24. HOURS CODE CODE 1	25. DATE OF BIRTH MO DA YE 05 12 1949	26. DATE OF GRADE MO DA YE 12 22 63	27. DATE OF HI MO DA YE 12 24 63	
25. RPT. DATES MO DA YE 		29. SPECIAL REFERENCE CODE 1-CEI 2-IEIO 3-HOD	30. RETIREMENT DATA CODE 1		31. SEPARATION DATA CODE TYPE MO DA YE	32. CORRECTION CANCELLATION DATA CODE MO DA YE		33. SECURITY REC. NO CODE 00000	34. SEL CODE L1
35. VET PREFERENCE CODE 8-BORN 1-1 PT 2-10 PT		36. SERV COMP DATE MO DA YE 6 06 64		37. LONG COMP DATE MO DA YE 1 12 68		38. CAREER CATEGORY CODE 1		39. FEES/HEALTH INSURANCE CODE 0-00-000 1-YES 0-NO	
40. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO SERVICE IN SERVICE 2-SERVICE IN SERVICE LESS THAN 3 YEARS 3-SERVICE IN SERVICE MORE THAN 3 YEARS		42. LEAVE CAT CODE 1		43. FEDERAL TAX DATA CODE 1-YES 2-NO		44. STATE TAX DATA CODE 1-YES 2-NO		45. SOCIAL SECURITY NO	
46. POSITION CONTROL CERTIFICATION CODE 1		47. O.P. APPROVAL CODE 1		48. O.P. APPROVAL CODE 1		49. DATE APPROVED 13 Aug 64			

\*\* 1152 USE PREVIOUS EDITION

SECRET

GROUP 1  
EXEMPT FROM AUTOMATIC DOWNGRADING  
AND DECLASSIFICATION

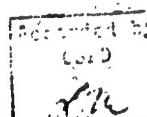
SECRET

(B) NOT FILED

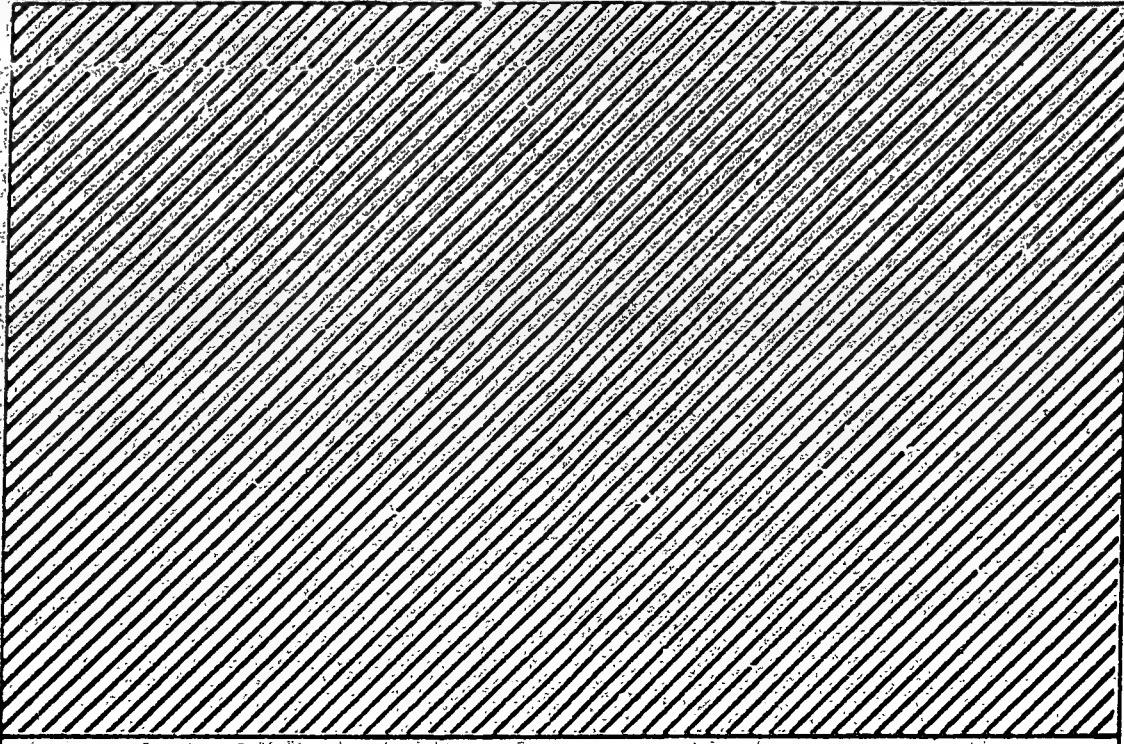
DATE PREPARED

0 APR 1 1964

## REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (Last, First, Middle)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT	
02763		██████████		Promotion - 1 Year		01 APR 1964		PACIFIC	
6. FUNDS		7. VETO V		8. VETO C		9. COST CENTER NO. CHARGEABLE		10. LEGAL AUTHORITY (Completed by Office of Personnel)	
		O TO V		O TO C		4352-7001-1000			
11. ORGANIZATIONAL DESIGNATIONS		12. LOCATION OF OFFICIAL STATION		13. POSITION TITLE		14. POSITION NUMBER		15. CAREER SERVICE DESIGNATION	
DOD/Special Missions Staff U. S. Field Forward Operations Station - JMAVE CI Section		TOMAYS		OPS OFFICER		0733		D	
16. CLASSIFICATION SCHEDULE (GS, LS, etc.)		17. OCCUPATIONAL SERIES		18. GRADE AND STEP		19. SALARY OR RATE		20. REMARKS	
GS		0135.01		12 (1)		\$ 0000		<div style="text-align: center;">     </div>	
1. by Security 1. by Payroll									
16. SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED		18. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			DATE SIGNED	
Charles C. Roemer ORVILLE J. DIAZON, MA/CAP/PFC			17 April 64		John G. Miller			17 April 64	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. HOURS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI	
45	10	NUMERIC ALPHABETIC				MO DA YR	MO DA YR	MO DA YR	
28. RITE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA	32. CORRECTION CANCELLATION DATA	33. SECURITY REG RD		34. SEA	
MO DA YR			1-CSC 2-FICA 3-NONE	CODE	TYPE	MO DA YR	EOD DATA		
35. VET PREFERENCE		36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY	39. FIGHT HEALTH INSURANCE	40. SOCIAL SECURITY NO			
CODE 0-NONE 1-1 PT 2-10 PT		MO DA YR	MO DA YR	CAR RESV PROV TEMP	CODE	0-00 YRS 1-10+	HEALTH INS CODE		
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA			
CODE 0-NO PREVIOUS SERVICE 1-BEEN IN SERVICE 2-BEEN IN SERVICE LESS THAN 3 YEARS 3-BEEN IN SERVICE MORE THAN 3 YEARS					FORM EXECUTED CODE	NO TAX EXEMPTIONS	FORM EXECUTED	CODE	INC TAX STRP STATE CODE
					1-YES 2-NO		1-YES 2-NO		
45. POSITION CONTROL CERTIFICATION									
								DATE APPROVED 16 April 64	

**SECRET**

		
NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT	CLAIM NUMBER
HIDALGO, BALMES N.	#819 self	60-264
<p>There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>30 May 1963</u>. Broken left foot.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF BENEFITS SPECIALIST <i>R. DeFelice</i>	
<b>NOTICE OF OFFICIAL DISABILITY CLAIM FILE</b>		

SECRET

(When Filled In)

DATE PREPARED

18 April 1963

REQUEST FOR PERSONNEL ACTION															
1. SERIAL NUMBER [REDACTED]				2. DATE PREPARED 18 April 1963											
3. SIGNATURE OF PERSONNEL ACTION <b>EXCITED APPOINTMENT</b>				4. EFFECTIVE DATE REQUESTED 04 28 63											
5. FUNDS [REDACTED]				6. CATEGORY OF EMPLOYMENT PERIODIC											
				7. COST CENTER NO. CHARGE NAME 3132-2001-1000											
8. ORGANIZATIONAL DESIGNATION DDP/Special Affairs Staff U.S. Field Forward Operations Station - JMWAVE CI Section				9. LOCATION OF OFFICIAL STATION JMWAVE											
10. POSITION TITLE OPS OFFICER				11. POSITION NUMBER 0732		12. CAREER SERVICE DESIGNATION D									
13. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		14. OCCUPATIONAL SERIES 0136.01		15. GRADE AND STEP 11 (4)		16. SALARY OR RATE \$ 8840									
17. REMARKS  <i>P - 359</i>  <div style="text-align: right; border: 1px solid black; padding: 2px;">Recorded by CSPD <i>Gle</i></div>															
18. SIGNATURE OF REQUESTING OFFICER <i>Lewis W. Armstrong, C/SAS/PAE</i>			DATE SIGNED 18 Apr 63		19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 11 Apr 63								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
20. ESSN OR SSN 13 10 61770 515 9999		21. OFFICE CITY CODE [REDACTED]		22. STATE OR CODE [REDACTED]		23. MILEAGE CODE		24. HOURS CODE		25. DATE OF BIRTH MM DD YY		26. CAREER DATA CODE		27. CAREER DATA CODE	
28. RATE EXPIRES 04 00		29. SPECIAL REFERENCES 1 2 3 4 5 6		30. ALIGNMENT DATA CODE		31. SEPARATION DATA CODE		32. CREDIT INVESTIGATE DATA CODE		33. MEDICAL INSURANCE CODE		34. SOCIO-ECONOMIC CODE			
35. RET. PREFERENCE 1 2 3 4 5 6		36. TERM COM. DATE 07 01 63		37. PROG. COMP. DATE 07 01 63		38. CAREER CATEGORY CODE		39. MEDICAL INSURANCE CODE		40. SOCIO-ECONOMIC CODE					
41. PREVIOUS GOVERNMENT SERVICE DATA CODE		42. FEDERAL TAX DATA CODE		43. STATE TAX DATA CODE		44. STATE TAX DATA CODE									
45. POSITION CONTROL CERTIFICATION <i>25 Kearny 4/22/63</i>															

FORM 1152 COMPLETE PREVIOUS EDITIONS  
4-62 ARE OBSOLETE

SECRET

GROUP I  
REFRESH & MAINTAIN  
AND DECLASSIFICATION

(4)

SECRET

DATE PREPARED

18 April 1963

REQUEST FOR PERSONNEL ACTION				DATE PREPARED		
1. SERIAL NUMBER	2. NAME (Last-First-Middle)					
027630	HILLMAN, R. N., Jr.					
3. NATURE OF PERSONNEL ACTION RESIGNATION				4. EFFECTIVE DATE REQUESTED	5. CATEGORY OF EMPLOYMENT	
				0400 27 1963	REGULAR	
6. FUNDS	X	V TO V	V TO CP	7. COST CENTER NO. CHARGEABLE		8. LEGAL AUTHORITY (Completed by Office of Personnel)
		CP TO V	CP TO CP	3032-1000-1000		
9. ORGANIZATIONAL DESIGNATIONS DCP Special Affairs Staff FI/CIA Branch				10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 0682	13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 11 (4)	17. SALARY OR RATE \$ 8840	
18. REMARKS						
Recorded by CSPD <i>[Signature]</i>						
19. SIGNATURE OF REQUESTING AGENT Louis W. Armstrong, GS-15, E-7c		DATE SIGNED 18 Apr 63		20. SIGNATURE OF CAREER SERVICE APPROVING AGENT <i>[Signature]</i>		DATE SIGNED 18 Apr 63
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
21. ACTION CODE	22. PAYROLL CODE	23. PAY RATE	24. PAYMENT IN ADVANCE	25. DATE OF PAY	26. DATE OF PAY	
45/10	W-1000	1000	1000	1000	1000	
27. RET. EXP. RES.	28. SPINN. REFERENCE	29. RET. REIMB. DATE	30. SEPARATION	31. SEPARATION	32. SEPARATION	
REG. DA			2000-0000	2000-0000	2000-0000	
33. VIT. PREFERENCE	34. SERV. COMM. DATE	35. VIT. COMM. DATE	36. CAREER CATEGORIES	37. REG. / HEALTH. RELEASE	38. COMM. RELEASE	
CODE: 1 - COMM 2 - VIT. 3 - COMM & VIT.			CARRIER PROGRESS	C-10 1000 1000 1000	1000 1000 1000 1000	
39. PREVIOUS GOVERNMENT SERVICE DATA	40. PAYROLL CODE	41. PAYROLL CODE	42. PAYROLL CODE	43. PAYROLL CODE	44. PAYROLL CODE	
CODE: 1 - NO PREVIOUS SERVICE 2 - NO GOVT. SERVICE 3 - SERVED IN SERVICE LESS THAN 5 YEARS 4 - SERVED IN SERVICE MORE THAN 5 YEARS		1000	1000	1000	1000	
45. POSITION CONTROL CERTIFICATION <i>[Signature]</i>			46. O.P. APPROVAL <i>[Signature]</i>			DATE APPROVED May 1 63

RZRI 25 APR 63

NOTIFICATION OF PERSONNEL ACTION									
<b>DEF.</b>									
1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)								
027630	MIDALGO B N JR								
3. NATURE OF PERSONNEL ACTION									
RESIGNATION									
4. FUNDS ➤ <input checked="" type="checkbox"/>	V TO V	V TO CP	5. EFFECTIVE DATE		6. CATEGORY OF EMPLOYMENT				
	EE TO V	EE TO CP	MO	DA	DD	MM	YY	REGULAR	
7. COST CENTER NO. (CHARGEABLE)									
3232 1000 1000									
8. CSC OR OTHER LEGAL AUTHORITY									
10. LOCATION OF OFFICIAL STATION									
11. POSITION TITLE									
OPS OFFICER									
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0136.01		11 4		8840			
18. REMARKS									
SIGNATURE OR OTHER AUTHENTICATION									

SECRET

REQUEST FOR PERSONNEL ACTION				DATE PREPARED		
1. SERIAL NUMBER 027630	2. NAME / OFFICE NUMBER ██████████			11 December 1963		
3. NATURE OF PERSONNEL ACTION PROMOTION		4. EFFECTIVE DATE REQUESTED 1963-12-11		5. CATEGORY OF EMPLOYMENT REGULAR		
6. FUNDS ►	V TO V	7. TO CF	8. COST CENTER NO. CHARGEABLE 4132-2001-1000	9. LEGAL AUTHORITY (Completed by Office of Personnel)		
10. ORGANIZATIONAL DESIGNATIONS DCP Special Affairs Staff U. S. Field Forward Operations Station - JMWAVE CI Section		11. LOCATION OF OFFICIAL STATION JMWAVE				
12. POSITION TITLE OPS OFFICER (O)		13. POSITION NUMBER 0731	14. CAREER SERVICE DESIGNATION D			
15. CLASSIFICATION SCHEDULE (GS, LS, OS, etc.) GS	(83)	16. OCCUPATIONAL SERIES 0136.01	17. GRADE AND STEP 12 (1)	18. SALARY OR RATE \$ 9475		
19. REMARKS						
20. SIGNATURE OF REQUESTING OFFICER Orville C. Dawson, C/SAC Pers.		DATE SIGNED 12/11/63	21. SIGNATURE OF CAREER SERVICE APPROVING OFFICER EOD DATA			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
22. ACTION CODE 1C	23. GRADE REQUEST 4200	24. GRADE STEP 000	25. GRADE STEP 000	26. GRADE STEP 000	27. GRADE STEP 000	28. GRADE STEP 000
29. PAY EXPENS IN SPECIAL REFERENCE		30. REASON FOR PAY 1. GS 2. LS 3. OS		31. REASON FOR PAY 1. GS 2. LS 3. OS		32. SIGNATURE EOD DATA
33. PAY PREFERENCE 1. GS 2. LS 3. OS		34. CAREER CATEGORIES 1. GS 2. LS 3. OS		35. PAY PREFERENCE 1. GS 2. LS 3. OS		36. SIGNATURE EOD DATA
37. PREVIOUS GOVERNMENT SERVICE DATA C/SAC		38. PAY PREFERENCE 1. GS 2. LS 3. OS		39. PAY PREFERENCE 1. GS 2. LS 3. OS		40. SIGNATURE EOD DATA
41. POSITION CONTROL CERTIFICATION R. R. Legare		42. OPA APPROVAL R. R. Legare		43. DATE APPROVED 12/11/63		

SECRET

WILSON'S PRACTICAL

SECRET

(This form is valid until 1965)

DATE PREPARED

4 January 1962

REQUEST FOR PERSONNEL ACTION								
1. SERIAL NUMBER	2. NAME (Last-First-Middle)							
027630	MIDALOO, JAMES W. JR.							
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>								
4. FUNDS	X	V TO V	V TO CP	5. EFFECTIVE DATE REQUESTED	6. CATEGORY OF EMPLOYMENT			
		CP TO V	CP TO CP	MONTH DAY YEAR	REGULAR			
7. ORGANIZATIONAL DESIGNATIONS				8. LOCATION OF OFFICIAL STATION				
DDP WH SECTION A PLANS & OPERATIONS STAFF				WASHINGTON, D.C.				
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 2A-641	13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, ER, etc.)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE \$8,000				
GS		0136.01	11 3					
18. REMARKS FROM: DDP/WH/4/FT-CI/1681								
19a. SIGNATURE OF REQUESTING OFFICIAL P. C. BOWERS C/WH/Personnel				DATE SIGNED	19b. SIGNATURE OF CAREER SERVICE APPROVING OFFICER R. Kiddy			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
20. ACTION CODE	21. EMPLOY. CODE	22. OFFIC. CODING	23. STATION CODE	24. UNIT/SPC. CODE	25. DATE OF BIRTH	26. DATE OF DEATH	27. DATE OF DIS	
200	C	2000		1	05/27/19			
28. R/T EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATE	31. SEPARATE PAYMENT FOR ANNUITY DATA	32. SECURITY REG. NO.	33. SEC. REG. NO.	34. SEC. REG. NO.	
MO. DA. YR.			3 - 1962 3 - 1963 3 - 1964	CODE	MO. DA. YR.	MO. DA. YR.	MO. DA. YR.	
35. VET. PREFERENCE		36. SERV. COMP. DATE	37. LONG. COM. DATE	38. MIL. SIGN. DATE	39. FEAT. / HEALTH INSURANCE	40. SOCIAL SECURITY NO.		
CODE 0 - NO 1 - 5 PT 2 - 10 PT		MO. DA. YR.	MO. DA. YR.	3 - YES 2 - NO	0 - UNLAW. 1 - YES			
41. PREVIOUS GOVERNMENT SERVICE DATA		42. PREV. CBT. CODE	43. GENERAL TAX DATA	44. STATE TAX DATA				
CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 12 MO. 3 - BREAK IN SERVICE MORE THAN 12 MO.			FROM FEDERAL 1 - NO 2 - YES	NO. TAX EXEMPTIONS 1 - YES 2 - NO	FROM STATE 1 - YES 2 - NO	STATE CODE		
45. POSITION CONTROL CERTIFICATION 1/16/62 J.M.				46. O.P. APPROVAL R. Kiddy				
				DATE APPROVED				

SECRET

(When Filled In)

DATE PREPARED

8 August 1961

REQUEST FOR PERSONNEL ACTION							
1. SERIAL NUMBER	2. NAME (Last, First, Middle)						
827630	HIDALGO, B. M. Jr.						
3. NATURE OF PERSONNEL ACTION REASSIGNMENT (And Transfer to Vouchered Funds)				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 1961 08 01	5. CATEGORY OF EMPLOYMENT REGULAR		
6. FLADS	V TO V	V TO CP		7. COST CENTER NO. CHARGEABLE 2635-5000-8021	8. LEGAL AUTHORITY (Completed by Office of Personnel)		
9. ORGANIZATIONAL DESIGNATIONS DDP/WH DDP Branch 4 PI-CI Sec.				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE OPS OFFICER (E)				12. POSITION NUMBER 0681	13. PCS CONTROL NO.	14. CAREER SERVICE DESIGNATION D	
15. CLASSIFICATION SCHEDULE (C.S., L.D., Etc.) CS (12)		16. OCCUPATIONAL SERIES 0136.01		17. GRADE AND STEP 11 (3)	18. SALARY OR RATE \$ 8,030		
19. REMARKS From DDP/WH, Br. 4, #0626							
20. SIGNATURE OF REQUESTOR (OFFICIAL) HERBERT V. JULY, CH/WH/67 Pers.				21. SIGNATURE OF CAREER SERVICE APPROVING OFFICER R. Peery			
22. SIGNATURE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
23. PAY ELEMENT CODE		24. PAY ELEMENT CODE		25. PAY ELEMENT CODE		26. PAY ELEMENT CODE	
16 10 60450 114 70013		11 00 00000 00000		1 05 2719 1		1 00 00000 00000	
27. PAY EXP. PER. MO. DA. YR.		28. PAY ELEMENT CODE		29. PAY ELEMENT CODE		30. PAY ELEMENT CODE	
1 - 1000 2 - 1000 3 - 1000 4 - 1000		0000		0000		0000	
31. PAY ELEMENT CODE		32. PAY ELEMENT CODE		33. PAY ELEMENT CODE		34. PAY ELEMENT CODE	
1 - 1000 2 - 1000 3 - 1000		0000		0000		0000	
35. PAY ELEMENT CODE		36. PAY ELEMENT CODE		37. PAY ELEMENT CODE		38. PAY ELEMENT CODE	
1 - 1000 2 - 1000 3 - 1000		0000		0000		0000	
39. PAY ELEMENT CODE		40. PAY ELEMENT CODE		41. PAY ELEMENT CODE		42. PAY ELEMENT CODE	
1 - 1000 2 - 1000 3 - 1000		0000		0000		0000	
43. PAY ELEMENT CODE				44. PAY ELEMENT CODE			
1 - 1000 2 - 1000 3 - 1000				0000			
45. POSITION CONTROL CERTIFICATION 7/7 Kearney 08/1/61							46. O.P. APPROVAL R. Peery

~~SECRET~~

## REQUEST FOR PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vet. Prefer.	5. Sex	6. C. FOU
	HIDALGO, BALTES M., JR.	Mo. Da. Yr.	Normal Code S P 1	M	Y
7. SCD	8. CSC Rec'd.	9. CSC Or Other Legal Authority	10. Appt. Alldow.	11. FEGLI	12. LCD
Mo. Da. Yr.	Yes - 1 Code No - 2		Mo. Da. Yr.	Yes - 1 Code No - 2	Mo. Da. Yr.
			05 27 19	10 P 2 1	M 1
				11 FEGLI	12 LCD
				13. Credit Rec'd.	
				Yes - 1 Code No - 2	

2

## PREVIOUS ASSIGNMENT

14. Organizational Designations  DDS/OPR OPERATIONS SCHOOL COVERT TRAINING	Code	15. Location Of Official Station  WASH., D. C.	Station Code		
16. Dept. - Field Dept : Code USMld : Frqn :	17. Position Title  INSTRUCTOR OPERATIONS	18. Position No. 1014	19. Ser. 20. Occup. Series GS 1711.50		
21. Grade & Step 11 2	22. Salary Or Rate \$ 7270	23. SD D	24. Date Of Grade Mo. Da. Yr. 03/17/60	25. PSI Due Mo. Da. Yr. 13 11 61	26. Appropriation Number 0175-2533

## ACTION

27. Nature Of Action  REASSIGNMENT	Code	28. Eff. Date Mo. Da. Yr. 06 26 60	29. Type Of Employee REGULAR	Code	30. Separation Data 17
--	------	--	---------------------------------	------	---------------------------

3A

## PRESENT ASSIGNMENT

31. Organizational Designations  DDP WH BRANCH 4	Code	32. Location Of Official Station  WASH., D. C.	Station Code		
33. Dept. - Field Dept : Code USMld : Frqn :	34. Position Title  OPS OFFICER	35. Position No. BA-626	36. Ser. 37. Occup. Series GS 0136.01		
38. Grade & Step 11 2	39. Salary Or Rate \$ 7270	40. SD D	41. Date Of Grade Mo. Da. Yr. 13 11 60	42. PSI Due Mo. Da. Yr. 13 11 60	43. Appropriation Number 0135 1000 1000

## SOURCE OF REQUEST

A. Requesting Agency And Title 1. P. C. POWERS WH/PERSONNEL OFFICER	C. Request Approved By (Signature And Title) 17 Jan 60
B. For Additional Information Call (Name & Telephone Ex.) JOHN WASHINGO X8242	

## CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	L. K. McCoy	1-21-60	D. Placement		
B. Pos. Control	L. K.	6-23-60	E.		
C. Classification			F. Approved By	W. L. Goss	6-23-60

Remarks

*1/21/60*  
*2 copies to Security. 1 Loss Notice.*  
*6-22-60*

~~SECRET~~

**SECRET**

(When Filled In)

DATE PREPARED Mo Do Yr 5 20 59			REQUEST FOR PERSONNEL ACTION						V-16 V <input checked="" type="checkbox"/> V-16 UV	UV-16 V <input type="checkbox"/> UV-16 UV
1. Serial No.			2. Name (Last-First-Middle) HIDALGO, Palma N., Jr.			3. Date of Birth	4. Voc. Prof.	5. Sex	6. CS <input type="checkbox"/> EOD	
						Mo Do Yr 5 27 19	None-0 Code S P R-2	M	Mo Do Yr	
7. SCD			8. CSC Rec'd. 9. CSC Or Other Legal Authority			10. Amt. Allocated	11. FEGLI	12. LCD	13. MIL SERV CREDIT LCD	
Mo Do Yr Yes - 1 Code No - 2						Mo Do Yr No - 2	Mo Do Yr No - 2	Mo Do Yr No - 2	Mo Do Yr Yes - 1 Code No - 2	

**PREVIOUS ASSIGNMENT**

14. Organizational Designations DDP/WH Branch III Central America Section			Code	15. Location Of Official Station Washington, D. C.			Station Code
16. Dept.-Field Dept. <input type="checkbox"/> Code Usfld. <input type="checkbox"/> Frgn. D	17. Position Title Area Ops Officer			18. Position No. 0486	19. Serv.	20. Occup. Series GS	0136.01
21. Grade & Step 11 1	22. Salary Or Rate \$ 7,030	23. SD D	24. Date Of Grade 03 17 58	25. PSI Due 09 20 59	26. Appropriation Number 8-3500-20		

**ACTION**

27. Nature Of Action Reassignment + Transfer to Confidential Grade			Code	28. Eff. Date Mo Do Yr 06 11 59	29. Type Of Employee Regular	Code	30. Separation Date 01
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**PRESENT ASSIGNMENT**

31. Organizational Designations DDS/OTR Operations School Covert Training			Code	32. Location Of Official Station Washington, D. C.			Station Code 7500-3
33. Dept.-Field Dept. <input type="checkbox"/> Code Usfld. <input type="checkbox"/> Frgn. D	34. Position Title Instructor Operations			35. Position No. 1014	36. Serv.	37. Occup. Series GS	1711.50
38. Grade & Step 11 1	39. Salary Or Rate \$ 7,030	40. SD D	41. Date Of Grade Mo Do Yr	42. PSI Due Mo Do Yr	43. Appropriation Number 9-7500-30-018		

**SOURCE OF REQUEST**

A. Requested By (Name And Title) C/OS	C. Request Approved By (Name And Title) Director of Training
B. For Additional Information Call (Name & Telephone Ext.) X-3078	

**CLEARANCES**

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>John J. Powell</i>	11 Jun 59	D. Placement		
B. Pos. Control	<i>CP</i>	11 Jun 59	E.		
C. Classification			F. Approved By	<i>C. Powell</i>	11 Jun 59

## Remarks

One copy forwarded to UNVouchered Payroll. Two copies forwarded to Security.

Recorded by  
CSPDFORM 1152a (USE PREVIOUS EDITION)  
1152a (1)

SECRET

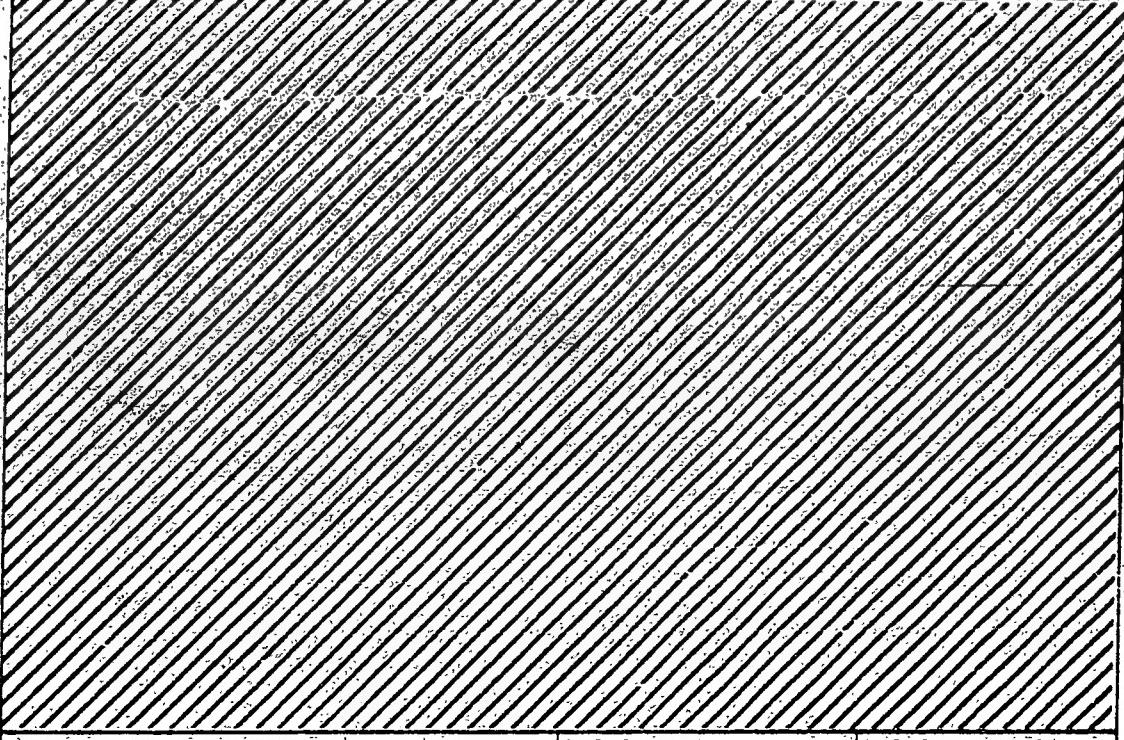
Security Approval Date 11 JUN 59  
11 JUN 59

11 JUN

59

**SECRET**

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NAME OF EMPLOYEE (LAST-FIRST-MIDDLE) HIDALGO, Ealmes	DATE OF BIRTH Unk	CASE OR CLAIM NUMBER 58-112
<p>There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee for an illness, injury, or death incurred on <u>1 Oct 57</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE 21 Sept 58	SIGNATURE OF BCO REPRESENTATIVE <i>[Signature]</i>	
<b>NOTICE OF OFFICIAL DISABILITY CLAIM FILE</b>		

**SECRET**Classify According  
To Content**REQUEST FOR PERSONNEL ACTION.**

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vet. Pict.	5. Sex	6. GS - EOD
12702	MR. BALMIS N. HIDALOO, Jr.	Mo 5 Da 27 Yr 19	None-0 Code 5 PI-1	1 M	Mo 2 Da 17 Yr 51
7. SCD	8. CSC Rating	9. CSC Or Other Legal Authority	10. Appt. Affidav.	11. FEGLI	12. LCD
Mo 7 Do 16 Yr 46	Yes - 1 Code No - 2	1 50 41 19 43	No 3 Da 13 Yr 56	Yes - 1 Code No - 2	Mo 1 Do 2 Yr 21

**PREVIOUS ASSIGNMENT**

14. Organizational Designations	Code	15. Location Of Official Station	Station Code		
16. Dept.- Field	17. Position Title	18. Position No.	19. Serv.	20. Occup. Series	
Dept - X Code					
Usfld -					
Fran -					
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number
	\$		Mo 3 Da 17 Yr 58	Mo 9 Da 26 Yr 59	

**ACTION**

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
Excepted Appointment	13	Mo 3 Da 17 Yr 58	Regular	01	

**PRESENT ASSIGNMENT**

31. Organizational Designations	Code	32. Location Of Official Station	Station Code		
DDP/AH Branch III Central America Section	4613	Washington, D.C.			
33. Dept.- Field	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series	
Dept - X Code	Area Ops Officer	# BA-486-11	GS	0126.01	
Usfld -					
Fran -					
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number
11-i	\$ 6390	D	Mo 21 Da 17 Yr 58	Mo 9 Da 26 Yr 59	8-3500-20

**SOURCE OF REQUEST**

A. Requested By (Name And Title)	C. Request Approved By (Signature And Title)
P.C. BOERS W.H. Personnel Officer	

B. For Additional Information Call (Name & Telephone Ext.)  
JOHN WASHINKO X 8242

**CLEARANCES**

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>[Signature]</i>	3/12/58	D. Placement	<i>[Signature]</i>	3/14/58
B. Pos. Control	<i>[Signature]</i>	3/11/58	E.		
C. Classification			F. Approved By	<i>[Signature]</i>	10 APR 1958

**Remarks**

Subject is presently engaged as a Contract Employee with the WH Division.  
\* For slotting purposes Only.

*Approved for DOD project  
K.W. Johnson  
SSA file*

STANDARD FORM 52 FEBRUARY 1952 EDITION OF 1952 GSA GEN. REG. NO. 27 APPROVED FOR USE THROUGH 1955 MANUAL CHAPTER 1 <i>SECRET</i>				UNVOUCHERED			
<b>REQUEST FOR PERSONNEL ACTION</b>							
<b>REQUESTING OFFICE:</b> Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.							
1. NAME (Mr. - Miss - Mrs. - One given name, initial(s), and surname)		2. DATE OF BIRTH		3. REQUEST NO.		4. DATE OF REQUEST	
Mr. Balme N. HIDALGO, Jr.		27 May 1919				8 July 55	
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment; promotion, separation, etc.)		6. POSITION (Specify whether elevation, change grade or title, etc.)		7. EFFECTIVE DATE A. PROPOSED:		8. C.S. OR OTHER LEGAL AUTHORITY	
Excepted Appointment							
9. APPROVED:							
FROM—		10. POSITION TITLE AND NUMBER		11. SERVICE GRADE AND SALARY		12. ORGANIZATIONAL DESIGNATION	
		I. O. (FI) BAF-277		GS-0130.51-11, \$6390.00 p.a. K		DDP/WH Panama City, Panama	
FIELD		DEPARTMENTAL		13. FIELD OR DEPARTMENTAL		FIELD	
						DEPARTMENTAL	
A. REMARKS (Use reverse if necessary)							
Subject is presently a contract employee with Project HYPOTHESIS.							
B. REQUESTED BY (Name and title) <i>James Schmitz</i> C/NH				C. REQUEST APPROVED BY Signature: _____ Title: _____			
D. FOR ADDITIONAL INFORMATION (Name and telephone extension) P. C. BOVETZ, X3692							
13. VETERAN PREFERENCE				14. POSITION CLASSIFICATION ACTION			
NAME	WWII	OTHER	S PT	13 POINT	NEW	VICE	I.A.
				DISAB. OTHER			REAL
15. SEX	16. RACE	17. APPROPRIATION FROM:		18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	
M	W	TO: 6-3525-56-051		YES		SD:DO 1/26 STATE:	
21. STANDARD FORM 50 REMARKS							
22. CLEARANCES		INITIAL OR SIGNATURE		DATE	REMARKS		
A.							
B. CEIL. OR POS. CONTROL		<i>Og -</i>		<i>8 Aug 55</i>			
C. CLASSIFICATION							
D. PLACEMENT OR EMPL.		<i>220</i>		<i>2-20</i>			
E.							
F. APPROVED BY				<i>7/28/55</i>			

SECRET

(Form 1516-10)

1. PERSONAL SERIAL NO. 027630		BIOGRAPHIC PROFILE (PART I) (CD) 16 Jul 1976																																																																																							
2. NAME (Last-First-Middle) HIMMEL, B. N., Jr.		3. SEX M	4. DATE OF BIRTH 27 May 1910	5. LONGEVITY COM. DATA 19 Feb 1952																																																																																					
6. MARITAL STATUS Widowed		7. DEPENDENTS (Excl. Chd.) 0	8. YEAR OF BIRTH 2 1914 1892	9. US NATURALIZATION DATA Puerto Rico NA																																																																																					
10. CAREER STAFF ALAVIS 1945-51		11. MEMBERSHIP None	12. FORMER STATUS None	13. LAST MED. REC'D. Jul 1967	14. DUAL POS. Duty Only																																																																																				
15. EDUCATION Secondary Status X		16. SERVICE None	17. ACTIVE GRS CIA CAT-1	18. RELEASE TO CIA CAT-1	19. DEPARTMENT CAT-3																																																																																				
20. ASSESSMENT DATE None		21. PROFESSIONAL TEST DATE Feb 1958	22. LANGUAGE PROFICIENCY TEST DATE None																																																																																						
<p>1943-45 Military Service, US Army, Cpl - Infantry</p> <p>1945-47 Jersey City Quartermaster Depot, Jersey City, NJ - Inspector</p> <p>Francis H. Lazzetti Co (Food Wholesaler), NYC - Correspondece Clerk</p> <p>1948-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project</p> <p>1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk</p> <p>1950-51 American Trust Co (Bank), NYC - Collections Clerk</p> <p>1951-52 Dept of Defense, New York QM Procurement Agency, NYC - Inspector</p>																																																																																									
<p>16. NON-CIA EDUCATION High School Graduate</p> <p>1945-46 New York University - Foreign Trade, Business Law</p>																																																																																									
<p>17. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested)</p> <p>Portuguese - R Intim; W, P, S, U None (Oct 1959); T None - May 1958</p> <p>Spanish - R High; W Intim; P, S, U Native (Nov 1959); Translate, Interpret - May 1958</p>																																																																																									
<p>18. AGENCY SPONSORED TRAINING</p> <p>1958 Comm Party Org &amp; Ops</p> <p>1958 CI Famil</p> <p>1958 Info Rptg, Rpts &amp; Rpts</p> <p>1958 Operations</p> <p>1958 Intel Orient</p> <p>1959 Picks &amp; Locks</p> <p>1959 Audio Surveil Mgmt</p> <p>1966 Undetermined Entry (Int)</p>																																																																																									
<p>19. CIA EMPLOYMENT HISTORY SINCE 10 SEPT 1947 (Personnel Actions, Military Orders, and Relocation Details)</p> <table border="1"> <thead> <tr> <th>EFFECTIVE DATE</th> <th>POSITION TITLE &amp; OCCUPATIONAL CODE</th> <th>RANK</th> <th>ED</th> <th>ORGANIZATION &amp; CHIEF TITLE (if any)</th> <th>LOCATION</th> </tr> </thead> <tbody> <tr> <td>Mar 1958</td> <td>Feb 1952 - Mar 1958, Contract Employee for DDP/WI/Project HYPOTHESIS</td> <td>11</td> <td>D</td> <td>DDP/WI-III/Control America</td> <td>IS Panama</td> </tr> <tr> <td></td> <td>Area Ops Off 0136.01</td> <td>11</td> <td>D</td> <td>DDP/WI-III/Control America</td> <td>Hq</td> </tr> <tr> <td></td> <td>Jan - Feb 1959, TDY Mexico and Guatemala</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Jun 1959</td> <td>Instructor (Ops) 1711.50</td> <td>11</td> <td>D</td> <td>OTR/Ops School/Covered Trng</td> <td>Hq</td> </tr> <tr> <td>Jun 1960</td> <td>Ops Off 0136.01</td> <td>11</td> <td>D</td> <td>DDP/WI-4</td> <td>"</td> </tr> <tr> <td>AUG 1961</td> <td>" "</td> <td>11</td> <td>D</td> <td>DDP/WI-4/CI Sec</td> <td>"</td> </tr> <tr> <td>Jan 1962</td> <td>" "</td> <td>11</td> <td>D</td> <td>DDP/WI/Plans &amp; Ops Sec/Sec &amp;</td> <td>"</td> </tr> <tr> <td>Apr 1963</td> <td>" "</td> <td>11</td> <td>D</td> <td>DDP/SAS/US Fld/Forward, Ops Sec</td> <td>JAPANESE</td> </tr> <tr> <td>Dec 1963</td> <td>" "</td> <td>12</td> <td>D</td> <td>DDP/SAS/CS/OS Dev Corp</td> <td>"</td> </tr> <tr> <td>Apr 1964</td> <td>" "</td> <td>12</td> <td>D</td> <td>DDP/SAS/CI Staff/Ops</td> <td>Hq</td> </tr> <tr> <td>Nov 1964</td> <td>" "</td> <td>12</td> <td>D</td> <td>DDP/SAS/CI Staff/Ops</td> <td>"</td> </tr> <tr> <td>May 1965</td> <td>" "</td> <td>12</td> <td>D</td> <td>DDP/WI/C/3 Com Op Dr</td> <td>"</td> </tr> <tr> <td>Dec 1965</td> <td>" "</td> <td>12</td> <td>D</td> <td>DDP/WI-2/Panama</td> <td>"</td> </tr> </tbody> </table>						EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	RANK	ED	ORGANIZATION & CHIEF TITLE (if any)	LOCATION	Mar 1958	Feb 1952 - Mar 1958, Contract Employee for DDP/WI/Project HYPOTHESIS	11	D	DDP/WI-III/Control America	IS Panama		Area Ops Off 0136.01	11	D	DDP/WI-III/Control America	Hq		Jan - Feb 1959, TDY Mexico and Guatemala					Jun 1959	Instructor (Ops) 1711.50	11	D	OTR/Ops School/Covered Trng	Hq	Jun 1960	Ops Off 0136.01	11	D	DDP/WI-4	"	AUG 1961	" "	11	D	DDP/WI-4/CI Sec	"	Jan 1962	" "	11	D	DDP/WI/Plans & Ops Sec/Sec &	"	Apr 1963	" "	11	D	DDP/SAS/US Fld/Forward, Ops Sec	JAPANESE	Dec 1963	" "	12	D	DDP/SAS/CS/OS Dev Corp	"	Apr 1964	" "	12	D	DDP/SAS/CI Staff/Ops	Hq	Nov 1964	" "	12	D	DDP/SAS/CI Staff/Ops	"	May 1965	" "	12	D	DDP/WI/C/3 Com Op Dr	"	Dec 1965	" "	12	D	DDP/WI-2/Panama	"
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20. DATE REVIEWED 22 Jun 1976		21. PROFILE REVIEWED BY None		22. RECORDS REVIEWED & VERIFIED BY EXECUTIVE Oval 1950																																																																																					
<p>Form 1200 (Part I) (Rev. Previous Editions)</p> <p>SECRET PROFILE</p>																																																																																									

0037 1200 (PART I) (REV. PREVIOUS EDITIONS)

SECRET

PROFILE

**SECRET**

(When Filled In)

100. SERIAL NO. 022630	BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) HARVEY, P. N., Jr.	DATE OF BIRTH 27 May 1919	
23. SUMMARIES OF EVALUATIVE REPORTS FOR THE PAST TWO YEARS		
 <p>24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE</p>		
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL		
26. ADDITIONAL INFORMATION <u>Appreciation</u> 1948 from TSD/AP/CAS for the postal intercept exemplars which are invaluable to that office.		
27. DATE REVIEWED 23 Jun 1969	28. PROFILE REVIEWED BY bms/bts	

FORM NO. 1200 (PART 2) REPLACES FORM 1000 (PART 2) SECRET  
1 FEB 57 WHICH IS OBSOLETE.

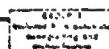
PROFILE

148

SECRET

(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER 027630
<b>SECTION A</b>					<b>GENERAL</b>
1. NAME <b>Hidalgo, Balmes, N.</b>	2. DATE OF BIRTH <b>05/27/19</b>	3. SEX <b>M</b>	4. GRADE <b>GS-12</b>	5. SD <b>D</b>	
6. OFFICIAL POSITION TITLE <b>Ops Officer</b>	7. OFF/ON DAY OF ASSIGNMENT <b>DDP/ANH/2</b>	8. CURRENT STATION <b>HQS</b>			
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <small>CAREER/PROVISIONAL (See Instructions - Section C)</small>	10. CHECK (X) TYPE OF RL REPORT <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL	11. REASSIGNMENT SUPERVISION <input type="checkbox"/> REASSIGNMENT EMPLOYEE			
12. SPECIAL (Specify) <small>SPECIAL (Specify)</small>	13. REPORTING PERIOD (From To) <b>31 January 1968 - 31 December 1968</b>				
<b>SECTION B</b> PERFORMANCE EVALUATION					
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
<b>SPECIFIC DUTY NO. 1</b> Desk Case Officer for Panama City Station FI operations. Prepares cables and dispatches to Panama City and other Stations and internal Headquarters correspondence.					RATING LETTER <b>P</b>
<b>SPECIFIC DUTY NO. 2</b> Conducts required coordination with other offices within the agency.					RATING LETTER <b>P</b>
<b>SPECIFIC DUTY NO. 3</b> Supervises and/or maintains files and regulates indexing relating to his cases.					RATING LETTER <b>P</b>
<b>SPECIFIC DUTY NO. 4</b>					RATING LETTER
<b>SPECIFIC DUTY NO. 5</b>					RATING LETTER
<b>SPECIFIC DUTY NO. 6</b>					RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance, during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER <b>P</b>



SECRET

**SECTION C****NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B. Provide basis for determining future personnel action. Mention of performance of managerial or supervisory duties and cost consciousness. In the case of personnel aspects, equipment and funds must be commented on if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Hidalgo is a man of unusual background even in our unusual organization. This background undoubtedly affords him qualifications for our work, but nevertheless, on the professional level he suffers from disadvantages as well--overcoming some but not others. He is not well-educated in a formal sense, and in our world of words is not adequately equipped to prepare finished written correspondence. He has difficulty in organizing his work systematically, thus at times, giving an impression that the preparation has not been thorough--which might not really have been true.

On the other hand, Mr. Hidalgo has the advantage of native fluency in Spanish and an obvious understanding of the Latin thinking process and culture. He is broadly experienced in operations, not only as a case officer but as an actual agent himself, having served four years as a Bureau penetration of the CPUSA. He is operationally imaginative and unquestionably possesses the ingenuity and courage to translate ideas into action. In this respect, however, his efforts must be channeled and selectivity exercised. On the Panama Desk this officer provides the valuable service of operational history and continuity; he served six years in the Station and has been on the desk for three.

Continued

**SECTION D****CERTIFICATION AND COMMENTS**

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

9 Jan 1969

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

4

DATE

OFFICIAL TITLE OF SUPERVISOR

9 January 1969

ATURE

C/WII/2/p

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Mr. Hidalgo is an experienced and well qualified operations officer, and it is indeed unfortunate that there are medical problems which do not allow him to be assigned overseas. Since Mr. Hidalgo cannot be assigned overseas, I too endorse his desire to be assigned to OTR or to another assignment of his choice.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

9 JAN  
1969

C/WII/2

Edwin M. Tevrell

SECRET

~~SECRET~~**SECTION C Continued****Hidalgo, Balme N.**

Mr. Hidalgo is a gregarious uncomplicated person, generally pleasant, and generous in his instincts--but not entirely without his quixotic side--and one whose natural Latin emotionality has been intensified by a life of experiences outside the norm, e.g. years as a CP penetration, air crashes, war wounds, etc.

This officer is aware that his intellectual background and medical debilities are obstructions to his advance. Understandably, he has developed outside interests, apparently as compensation. Expectedly, his attitudes at times so reflect.

In sum, Mr. Hidalgo serves a satisfactory function on the Panama Desk and no doubt could continue to perform so indefinitely, but in view of his limitations in a desk-bound situation and the medical restrictions, both of which will continue to inhibit his advance in his present component, this supervisor endorses Mr. Hidalgo's desire to be considered for transfer to another component, namely OTR (specifically covert training), where his attributes would likely come more directly into play. He has the operational experience, competency in a foreign language, an outgoing personality, and experience in lecturing and teaching.\* Finally, regardless of the shortcomings reflected in this evaluation, the grading officer finds much to admire in Mr. Hidalgo personally.

\*Should a suitable opening in that field be unavailable, it is felt there would be merit also in considering Mr. Hidalgo's other stated interests, i.e., the technical interrogation section of the Office of Security or OO Contacts Division.

~~SECRET~~

SECRET  
(When Filled In)

<b>FITNESS REPORT</b>				EMPLOYEE SERIAL NUMBER <b>027630</b>			
<b>SECTION A</b>							
				<b>GENERAL</b>			
1. NAME <b>HIDALGO, Balmes N., Jr.</b>	2. DATE OF BIRTH <b>27 May 1919</b>	3. SEX <b>M</b>	4. GRADE <b>GS-12</b>	5. SD <b>D</b>			
6. OFFICIAL POSITION TITLE <b>Ops Officer</b>	7. OFF DIV BN OF ASSIGNMENT <b>DDP/NH/2</b>	8. CURRENT STATION <b>Headquarters</b>					
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (300 Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify) 10. DATE REPORT DUE IN O.P. <b>13 JULY 1967 by 0700 hrs 12-66</b>				11. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE SPECIAL (Specify) 12. REPORTING PERIOD (From - To) <b>13 JULY 1967 to 0700 hrs 12-66</b>			
<b>SECTION B</b>							
<b>PERFORMANCE EVALUATION</b>							
W - Weak	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.						
A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.						
P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.						
S - Strong	Performance is characterized by exceptional proficiency.						
O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.						
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 <b>Responsible for all FI/CI Projects for the Desk</b>							RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 2 <b>Initiates, prepares and coordinates all operational communications to the field on FI/CI matters</b>							RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 3 <b>Prepares project renewals, studies and papers on FI/CI matters</b>							RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 4 <b>Translates Spanish language material for the Branch</b>							RATING LETTER <b>O</b>
SPECIFIC DUTY NO. 5 <b>Coordinates FI/CI matters for the Desk with other Hqs components</b>							RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 6 <b>Occasionally handles visiting indigenous assets</b>							RATING LETTER <b>S</b>
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
31 MAR 1967 Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							
							RATING LETTER <b>S</b>

SECRET

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of such performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B. If provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if appropriate.

Comment by Mr. Tsikerdanos, previous supervisor | 51 F11 '67

Mr. Hidalgo is a very capable case officer who is more suited to a field position. He is adept at handling indigenous personnel and has a keen operational mind. He is good at grasping operational leads but is not a capable writer. He has trouble expressing himself on paper. His Spanish language capability is a decided asset to the Branch. A longstanding illness has limited his effectiveness at the Desk. He is cost conscious and has no supervisory responsibilities.

## Comments by Present Supervisor:

I concur in the above estimate of Mr. Hidalgo's operational capabilities. During the months (Oct 1966 - March 1967) I have worked with Mr. Hidalgo I have not found his health to be a factor in his performance of his duties.

Ken Knaus

## SECTION D

## CERTIFICATION AND COMMENTS

1. BY EMPLOYEE	
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT	
DATE 10 March 67	SIGNATURE OF EMPLOYEE <i>Robert J. Tsikerdanos</i>
2. BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 11	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
DATE 9 MAR 9 MAR	OFFICIAL TITLE OF SUPERVISOR Formerly C/NH/2/P Present C/WH/2/P
3. BY REVIEWING OFFICIAL	
COMMENTS OF REVIEWING OFFICIAL Mr. Hidalgo's health caused him to be absent from his duties several times during the first part of 1966 but these absences were for a limited period. From my observation, his health has not presented a serious problem to the performance of his duties.	

Several times during the absence of Mr. Tsikerdanos in the year 1966 Mr. Hidalgo was the acting desk officer. His performance was most satisfactory, and his supervision of the other desk employees, albeit for a limited period, was fully satisfactory.

DATE 10 MAR 67	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WH/2	TYPED OR PRINTED NAME AND SIGNATURE <i>Edwin W. Terrell</i> Edwin W. Terrell
----------------------	--	--

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER C27630			
<b>SECTION A</b>							
<b>GENERAL</b>							
1. NAME (Last) (First) (Middle)	(Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
WALCO, Palmez A., Jr.				27-1-19	M	O-12	D
6. OFFICIAL POSITION TITLE	C.S. D/CUS			7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION HQ-QRTERS		
DD-1				DD-1			
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY		<input type="checkbox"/> INITIAL	REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL	REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):				<input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From To)			
				16-1-65	30 October 1965		
<b>SECTION B</b>							
<b>PERFORMANCE EVALUATION</b>							
W - Weak	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.						
A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.						
P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.						
S - Strong	Performance is characterized by exceptional proficiency.						
O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.						
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Headquarters desk officer responsible for the support of Miami Station CI/CE activities and operations.							RATING LETTER P
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and personnel.							RATING LETTER S
SPECIFIC DUTY NO. 3 Briefing representatives of foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.							RATING LETTER S
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.							RATING LETTER S
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							
4 JAN 1965							RATING LETTER S
FORM 45 OBSOLETE PREVIOUS EDITIONS. 6-62				SECRET			
Table 1 Individual Item Summary Comparative and Performance							

SECRET

## NARRATIVE COMMENTS

## SECTION C

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B. If provide best basis for determining future personnel action. Managerial performance of manager of other duty must be described, if applicable.

Mr. Hidalgo is an able intelligence officer, dedicated to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.

An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity.

He was cost conscious, always endeavoring to be conservative where possible.

He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.

## SECTION D

## CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

9 December 1965

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

8 months

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

9 December 1965

OFFICIAL TITLE OF SUPERVISOR

C/WH/C/MO/FI-CI

TYPED OR PRINTED NAME AND SIGNATURE

Susan L. Darling

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur with the supervisor's assessment of Mr. Hidalgo with exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.

DATE

9 December 1965

OFFICIAL TITLE OF REVIEWING OFFICIAL

C/WH/C/MO

TYPED OR PRINTED NAME AND SIGNATURE

Walter T. Cini

SECRET

SECRET

(Form 1500-10)

1. FILE NUMBER 27630		BIOGRAPHIC PROFILE (PART I/SCD: 16 Jul 1946)					
2. NAME (Last-First-Middle) Raimo Kihns, Jr.		3. SEX	4. DATE OF BIRTH M May 1919	5. LENGTH OF CIA SERVICE 17 Mar 1958			
6. MARITAL STATUS Married		7. DEPENDENTS None	8. YEAR(S) OF BIRTH 3 1927-1945-1950	9. NATURALIZATION STATUS NA Puerto Rico NA			
10. CARRIER STATUS None		11. MEMBERSHIP None	12. ACTIVE DUTY STATUS Pending	13. LAST DUTY PERIOD Sep 1962	14. EVAL FOR Duty Only	15. TO BE RELEASED TDY 0/S	
16. CURRENT RESERVE STATUS None		17. LANGUAGE PROFICIENCY TEST DATE Feb 1958	18. LANGUAGE PROFICIENCY TEST DATE None				
19. NON-CIA MILITARY SERVICE 1940-43 Military Service, US Army, Cpl - Infantry 1943-45 Jersey City Quartermaster Depot, Jersey City, NJ - Inspector 1945-47 Francis H. Lovett Co (Food Wholesaler), NYC - Correspondence Clerk 1946-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co (Bank), NYC - Collections Clerk 1951 Dept of Defense, New York QM Procurement Agency, NYC - Inspector							
20. NON-CIA EDUCATION 1945-46 New York University - Foreign Trade, Business Law							
21. FOREIGN LANGUAGE ABILITIES (Language Proficiency, Date Tested)		Portuguese - R Intern; W, P, S, U Zero (Oct 1959); T None - May 1958 Spanish - R High; W Intern; P, S, U Native (Nov 1959); Translate, Interpret - May 1958					
22. AGENCY SPONSORED TRAINING 1958 Comm Party Org & Ops 1958 Intel Orient 1958 CI Famil 1959 Picks & Locks 1958 Info Rptng, Rpts & Rqmts 1959 Audio Surveil Mgmt 1958 Operations							
23. CIA EMPLOYMENT HISTORY SINCE 10 SEPT 1947 (Personnel Actions, Military Orders, and Principal Details)							
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	SD	ORGANIZATION & ORIGIN, TITLE (if any)	LOCATION		
Mar 1958	Feb 1952 - Mar 1958, Contract Employee for DDP/WI/Project HYPOTHESIS Panama Area Ops Off.	0136.01	11 D	DDP/WI-III/Central America	Hq		
Jun 1959	Jan - Feb 1959, TDY Mexico and Guatemala Instructor(Ops)	1711.50	11 D	OTR/Ops School/Covert Trng	Hq		
Jun 1960	Ops Off	0136.01	11 D	DDP/WI-4	"		
Aug 1961	" "	0136.01	11 D	DDP/WI-4/FI-CI Sec	"		
Jan 1962	" "	0136.01	11 D	DDP/WI/Plans & Ops Stf/Sec A	"		
Apr 1963	" "	0136.01	11 D	DDP/SAS/US Fld/forward Ops Sta	JMWAVE		
24 Oct 1963	25. PROFILE REVIEWED BY OP/POP/01-1/hcs/rwh	26. ITEMS 10-19 REVIEWED & VERIFIED BY SUPERVISOR			27. PROFILE 9 Feb 1960		

Form 1200 (PART I) USE PREVIOUS EDITIONS  
GSA GEN. REG. NO. 27

SECRET

- PROFILE

100

SECRET  
*(This form is to be filled in)*

PERF. SERIAL NO. 27630	BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) HIDALGO, Balme Nieves, Jr.		DATE OF BIRTH May 1919
		
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASIGNMENT QUESTIONNAIRE		
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL		
26. ADDITIONAL INFORMATION		
27. DATE REVIEWED	28. PROFILE REVIEWED BY OP/PCD/QAB	

Form No. 1200 (Part 2) 100-1000-1000 (Part 2) SECRET  
GPO 1957 12-12-57

PROFILE

600

SECRET  
*(When Filled In)*

FITNESS REPORT				EMPLOYEE SERIAL NUMBER																
<b>SECTION A</b>				<b>GENERAL</b>																
1. NAME <i>HIDALGO, BALMES</i>		2. DATE OF BIRTH <i>27 May 1919</i>		3. SEX <i>M</i>	4. GRADE <i>GS-11</i>															
5. OFFICIAL POSITION TITLE <i>Ops Officer</i>		6. OFF/DIV/BR OF ASSIGNMENT <i>DDP WH PGO SEC A.</i>		7. CURRENT STATION <i>D</i>																
8. CHECK (X) TYPE OF APPOINTMENT <table border="1"><tr><td>CAREER</td><td>RESERVE</td><td>TEMPORARY</td></tr><tr><td colspan="3">CAREER-PROVISIONAL (See Instructions - Section C)</td></tr><tr><td colspan="3">SPECIAL (Specify):</td></tr></table>				CAREER	RESERVE	TEMPORARY	CAREER-PROVISIONAL (See Instructions - Section C)			SPECIAL (Specify):			9. CHECK (X) TYPE OF REPORT <table border="1"><tr><td>INITIAL</td><td>REASSIGNMENT SUPERVISOR</td></tr><tr><td>X ANNUAL</td><td>REASSIGNMENT EMPLOYEE</td></tr><tr><td colspan="2">SPECIAL (Specify):</td></tr></table>		INITIAL	REASSIGNMENT SUPERVISOR	X ANNUAL	REASSIGNMENT EMPLOYEE	SPECIAL (Specify):	
CAREER	RESERVE	TEMPORARY																		
CAREER-PROVISIONAL (See Instructions - Section C)																				
SPECIAL (Specify):																				
INITIAL	REASSIGNMENT SUPERVISOR																			
X ANNUAL	REASSIGNMENT EMPLOYEE																			
SPECIAL (Specify):																				
10. DATE REPORT DUE IN O.P. <i>30 October 1962</i>		11. REPORTING PERIOD (From To) <i>17 Jan 62 - 30 Sep 62</i>																		
<b>SECTION B PERFORMANCE EVALUATION</b>																				
<table border="0"> <tr> <td>W - Weak</td> <td>Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</td> </tr> <tr> <td>A - Adequate</td> <td>Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</td> </tr> <tr> <td>P - Proficient</td> <td>Performance is more than satisfactory. Desired results are being produced in a proficient manner.</td> </tr> <tr> <td>S - Strong</td> <td>Performance is characterized by exceptional proficiency.</td> </tr> <tr> <td>O - Outstanding</td> <td>Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</td> </tr> </table>						W - Weak	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.	A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.	P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.	S - Strong	Performance is characterized by exceptional proficiency.	O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
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S - Strong	Performance is characterized by exceptional proficiency.																			
O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.																			
<b>SPECIFIC DUTIES</b>																				
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).</p>																				
SPECIFIC DUTY NO. 1					RATING LETTER															
Responsible for initiation and development of WH Division durable assets program.					P															
SPECIFIC DUTY NO. 2					RATING LETTER															
Collate and maintain files on espionage laws of LA countries.					P															
SPECIFIC DUTY NO. 3					RATING LETTER															
Served as interpreter and translator for Division LA contacts.					P															
SPECIFIC DUTY NO. 4					RATING LETTER															
Coordinated with Branch 1 of WHD on FI and CI matters.					P															
SPECIFIC DUTY NO. 5					RATING LETTER															
Gives lectures as guest instructor to students attending School of International Communism.					S															
SPECIFIC DUTY NO. 6					RATING LETTER															
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>																				
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					RATING LETTER															
					P															

**SECRET**

(Form Filled In)

**SECTION C****NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.

It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.

**SECTION D****CERTIFICATION AND COMMENTS**

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

18 Sept 62

*Delmer L. Hidalgo*

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

18 September 1962

C/WH/PO/A

*Clark W. Simmons*

CLARK W. SIMMONS

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I have had insufficient personal contact with Subject to make any meaningful comments.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPE	IRE
13 September 1962	C/WH/OPS		

**SECRET**

**SECRET**  
(When Filled In)

<b>FITNESS REPORT</b>						EMPLOYEE SERIAL NUMBER 027630
<b>SECTION A</b>			<b>GENERAL</b>			
1. NAME <b>HIDALGO</b>	(Last) <b>Bulus</b>	(First) <b>N.</b>	(Middle) <b>Jr.</b>	2. DATE OF BIRTH <b>27 May 1919</b>	3. SEX <b>Male</b>	4. GRADE <b>GS-11</b>
5. SERVICE DESIGNATION <b>D</b>	6. OFFICIAL POSITION TITLE <b>Operations Officer</b>		7. OFF. DIV/ BR. OF ASSIGNMENT <b>DDP/WH, Br. 4, D.C.</b>			
8. CAREER STAFF STATUS			9. TYPE OF REPORT			
NOT ELIGIBLE	MEMBER	DEFERRED	INITIAL	REASSIGNMENT/SUPERVISOR		
PENDING	DECLINED	DENIED	X ANNUAL	REASSIGNMENT/EMPLOYEE		
10. DATE REPORT DUE IN O.P. <b>31 October 1961</b>	11. REPORTING PERIOD <b>Oct 60 - 30 Sep 61</b>	12. SPECIAL (Specify)				
<b>SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES</b>						
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).						
1. Unsatisfactory	2. Barely adequate	3. Acceptable	4. Competent	5. Excellent	6. Superior	7. Outstanding
SPECIFIC DUTY NO. 1 Hqs. C.O. for 3 major CI/FI Projects-at one time comprising 301 Agents. Originates operational traffic, Support traffic and maintains records and files.		RATING NO. 5	SPECIFIC DUTY NO. 4 Responsible for spotting, interviewing and recruiting of Cuban students in the U. S. for return to Cuba for operational purposes.		RATING NO. 5	
SPECIFIC DUTY NO. 2 Hqs. C.O. for 8 unilateral independent Agents, including originating operational and Support traffic, and maintaining proper records and files.		RATING NO. 4	SPECIFIC DUTY NO. 5		RATING NO.	
SPECIFIC DUTY NO. 3 Interviewing, briefing and debriefing Spanish only speaking Agents and contacts for all operational Sections of the Branch.		RATING NO. 6	SPECIFIC DUTY NO. 6		RATING NO.	
<b>SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION</b>						
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance:						
1. Performance in many important respects fails to meet requirements. 2. Performance meets most requirements but is deficient in one or more important respects. 3. Performance clearly meets basic requirements. 4. Performance clearly exceeds basic requirements. 5. Performance in every important respect is superior. 6. Performance in every respect is outstanding.						RATING NO. 5
<b>SECTION D DESCRIPTION OF THE EMPLOYEE</b>						
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee.						
1. Least possible degree	2. Limited degree	3. Normal degree	4. Above average degree	5. Outstanding degree		
CHARACTERISTICS				NOT APPLI-CABLE	NOT OBSERVED	RATING
GETS THINGS DONE						X
RESOURCEFUL						X
ACCEPTS RESPONSIBILITIES						X
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES						X
DOES HIS JOB WITHOUT STRONG SUPPORT						X
FACILITATES SMOOTH OPERATION OF HIS OFFICE						X
WRITES EFFECTIVELY						X
SECURITY CONSCIOUS						X
THINKS CLEARLY						X
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS						X
OTHER (Specify):						
SEE SECTION "E" ON REVERSE SIDE						

**SECRET**

(This Form is Confidential)

**SECTION E****NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE**

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Mr. Hidalgo has done a fine job during the reporting period, while assigned to the CI Section of the Branch when it was in its most active period of buildup and operations. The manner in which he accepted any assignment is unusual and he was often working under pressure. During the period, he was on several temporary duty trips in connection with operational activities, which he completed very well.

He has a talent for getting along with and understanding Latin Americans, and with his fluent Spanish language capability, he has performed in a commendable manner. While Mr. Hidalgo has never shunned responsibility, his assignment did entail the delegation of extensive responsibility. It is the feeling of the Rating Officer that he should be given the opportunity for greater responsibility, and training, which will qualify him for a supervisory role. After that, he should be qualified in all respects for promotion to GS-12.

**SECTION F****CERTIFICATION AND COMMENTS****1.****BY EMPLOYEE**

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE

SIGNATURE OF EMPLOYEE

**2.****BY SUPERVISOR**MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

11.

*Subject hospitalized.*

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS

REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

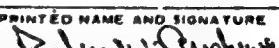
DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

20 March 62

D/Chief, WH/4/CI

  
 Robert W. Andrews
**3.****BY REVIEWING OFFICIAL** I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION. I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION. I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION. I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

21 March 1962

C/WH/4/CI

  
 CLARK W. SIMMONS
**SECRET**

SECRET

NOTIFICATION OF CANCELLATION  
OF OFFICIAL COVER BACKSTOP

DATE

14 September 1966

SUBJECT

Hidalgo, Bimes N., Jr.

TO: (Check)	CHIEF, PERSONNEL OPERATIONS DIVISION
	CHIEF, OPERATING COMPONENT (For Action)
<input checked="" type="checkbox"/>	CHIEF, CONTRACT PERSONNEL DIVISION WH
ATTN:	Mr. Hannah
REPI:	Form 1322 dated 9 September 1966
OFFICIAL COVER DISCONTINUED	

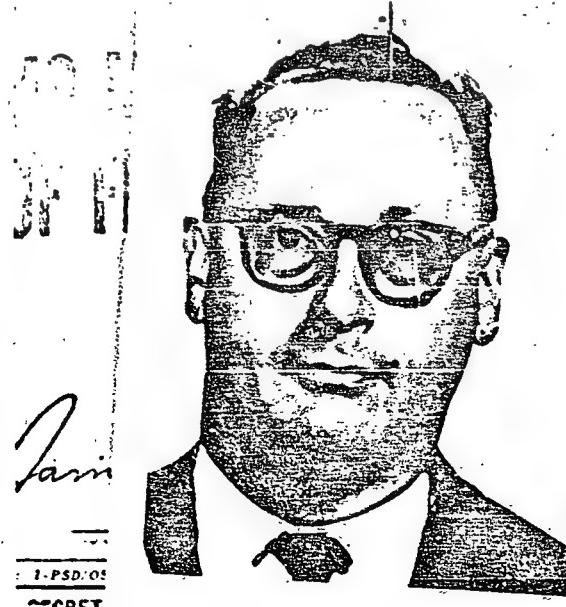
FILE NO.

9927

ID CARD NO.

1140 (Returned)

EMPLOYEE NO.

 Unblock Records:  
 (TOP Memo 20-800-11)Effective EOD Submit Form 642 To Change Limitation Category.  
(HB 20-800-2 to be redesignated HMB 20-7) Return All Official Documentation To CCS.

**SECRET**

NOTIFICATION OF ESTABLISHMENT OF COVER BACKSTOP		DATE <b>9 April 1964</b>
<b>TO:</b> (Check)	<input checked="" type="checkbox"/> CHIEF, RECORDS AND SERVICES DIVISION	ESTABLISHED FOR
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT . SAS	<b>HIDALGO, Balmes N., Jr.</b>
<b>ATTN:</b>		FILE NO. <b>K-7412</b>
<b>REF:</b>	<b>Request for Cover, 9 April 1964</b>	
MILITARY COVER BACKSTOP ESTABLISHED		
10 CARD NO.		
NA		
<input checked="" type="checkbox"/> BLOCK RECORDS: (OPMEMO 20-800-11)		
a. TEMPORARILY FOR _____ DAYS, EFFECTIVE _____.		
X <input checked="" type="checkbox"/> CONTINUING, EFFECTIVE <u>EDD</u> .		
<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3. (RB 20-800-2)		
<input type="checkbox"/> ASCERTAIN THAT ARMY W-2 BEING ISSUED. (RB 20-661-1)		
<input type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (R 240-250)		
<input type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (R 240-250)		
<input type="checkbox"/> REMARKS:		
<b>"MEMO MUST STAY IN TOP OF FILE"</b>		
<input type="checkbox"/> COPY TO CPO/OP		
<i>James H. Franklin</i>		
01/111 CHIEF, MILITARY COVER, CGC		
DISTRIBUTION: 1-OSD/PWS, 1-PSD/OS, 1-ADPD/COMPT		
SECRET		

# "C BREEDS BETTER CLOTHES"

卷之三

COPY TO CPA/OP

James T. Franklin

20/811

**CHIEF. MILITARY COVER. CCC**

— 1 —

Digitized by srujanika@gmail.com

Digitized by srujanika@gmail.com

FORM 7-62 1551 OBSOLETE PREVIOUS EDITIONS.

~~SECRET~~

DISTRIBUTION: 1-REF ID: A-PSO/OS 1-APED/COMPET

SECRET

NOTIFICATION OF ESTABLISHMENT OF COVER BACKSTOP		DATE
TO: <i>(Circles)</i>	<input checked="" type="checkbox"/> CHIEF, RECORDS AND SERVICES DIVISION  <input type="checkbox"/> CHIEF, OPERATING COMPONENT SAS	23 April 1963 ESTABLISHED FOR
ATTN:		HIDALGO, Balme N., Jr.
REF:	Verbal request for cover MILITARY COVER BACKSTOP ESTABLISHED	FILE NO. K-7412 ID CARD NO.
<input checked="" type="checkbox"/> BLOCK RECORDS: (OPMEMO 20-800-11)		
<p>a. TEMPORARILY FOR _____ DAYS, EFFECTIVE _____.</p> <p>b. CONTINUING, EFFECTIVE EOD _____.</p>		
<p><input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3. (RDB 20-800-2).</p> <p><input type="checkbox"/> ASCERTAIN THAT ARMY W-2 BEING ISSUED. (RDB 20-661-1)</p> <p><input type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (RDB 200-230)</p> <p><input type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (RDB 200-230)</p> <p><input type="checkbox"/> REMARKS:</p>		
<p><b>THIS NOTIFICATION REMAIN THEREBY IN FORCE ON THE DATE STATED.</b></p> <p><i>James W. Franklin</i></p> <p><input type="checkbox"/> COPY TO CPO/FOP</p>		
<p>CD/PP ENTER. MILITARY COVER. CCC</p> <p>DISTRIBUTION: 1-OSD/OS, 1-PSD/OS, 1-ADP/D/COMPT</p>		
<p>FORM 7-62 1551 (REPLACES PREVIOUS EDITIONS)</p> <p>SECRET</p>		

JUN 1963

SECRET

NOTIFICATION OF CANCELLATION OF <input type="text"/> COVER BACKSTOP		DATE
TO: <input checked="" type="checkbox"/> CHIEF, RECORDS AND SERVICES DIVISION <input type="checkbox"/> CHIEF, OPERATING COMPONENT - WH DIV		9 March 1962
ATTN: WH/SS <input type="text"/>	SUBJECT:	HIDALGO, BAILES N. JR.
REF: Your request of 1322 dated undated MILITARY COVER DISCONTINUED	FILE NO.	K-7412
	ID CARD NO.	832
<input checked="" type="checkbox"/> UNBLOCK RECORDS: (OP memo 20-800-11)		
EFFECTIVE <u>27 October 1960</u>		
<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HD 20-800-2)		
<input type="checkbox"/> RETURN ALL MILITARY DOCUMENTATION.		
<input type="checkbox"/> REMARKS:		
<p style="text-align: center;"><b>THIS ACTION DOES NOT RELATE ON THE FILE</b></p>		
<input type="checkbox"/> COPY TO CPD/OP		
39165		
DISTRIBUTION: 1-SS/		
FORM 12-61 1551a		

SECRET

(13-20-43)

~~SECRET~~

7 March 1968

RESTRICTEE: Chief, Records and Services Division  
Office of Personnel

RESCUEE: Personnel Security Division  
Office of Security

SUBJECT: Balme N. HIDALGO, Jr., Contract Employee

1. Cover arrangements have been completed for the above named subject.

2. Effective immediately, it is requested that your records be properly (blocked) (XXXXXX) to (deny) (XXXXXXXXXX) subject's current Agency employment by an external inquirer. Subject is to be converted to Staff Employee status within the next few days.

3. This memorandum confirms an oral request of 7 March 1968.

cc: PSD/CS  
~~EN~~

~~TOP SECRET~~ ~~POLAROID~~ ~~REMAINS~~

JES

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCT 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT:

NAME HIDALCO, B. N., JR.	SERIAL ORGN. F-13-S-GR-STEP 027630 51 250 V 12 5	NEW SALARY \$16,034
-----------------------------	---	------------------------

1 LAST NAME <b>HIDALCO, B. N. JR.</b>	INITIAL(S)	2 APPOINTMENT DATA Entered on duty <input checked="" type="checkbox"/> F.T. <input type="checkbox"/> P.T.	3. TOTAL SERVICE FOR LEAVE (as of _____ of separation)
		Subject to Sec 203(d) 1031 Leave Act Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Years Months Days
		Ceased to be subject to Sec 203(d) on _____ Annual Leave Bal _____	<input type="checkbox"/> More than 15 years
4 DATE AND NATURE OF SEPARATION RETIREMENT-DISABILITY-UNDER CIA RET AND DIS SYSTEM EFF 2/28/70		REMARKS	
SUMMARY OF ANNUAL AND SICK LEAVE (HOURS)		SUMMARY OF HOME LEAVE (DAYS)	
5 Balance from prior leave year ended <b>1970</b>	<b>1/10</b>	6 Annual <b>46</b>	7 Sick <b>8</b>
6 Current leave year accrual through <b>1970</b>	<b>2/21</b>	8 Annual <b>24</b>	9 Sick <b>12</b>
7 Total		10 Annual <b>70</b>	11 Sick <b>20</b>
8 Reduction in credits, if any (current year)		12 Date arrived abroad for NL purposes	SCD <b>7/16/46</b>
9 Total leave taken	<b>4 20</b>	13 Current balance as of _____ <b>19</b>	
10 Balance	<b>66 -0-</b>	14 12 month accrual rate	
11 Total hours paid in lump sum	<b>66 hrs</b>	15 Dates leave used, prior 24 months	
12 Salary rate(s)	<b>\$15,173.00</b>	16 Monthly accrual date	
13 Lump sum leave dates From <b>0830 3/02/70</b> to <b>3/11/70 1030</b> (Hours)		17 Calendar days credit for next accrual date	
14 Certified correct by <i>John H. Hidalco</i> (Signature) for Chief Payroll	<b>3/13/70</b> (Date) <b>113-2585</b> (Telephone)	18 Date basic service period completed	
		MILITARY LEAVE	
		19 Dates during current calendar yr _____ to _____	
		20 Dates during preceding calendar yr _____ to _____	
		ABSENCE WITHOUT PAY	
		21 During leave year in which separated	<input type="checkbox"/> LWOP or; AWOL or Furlough; Suspension (Hours)
		22 During step increase working period which began on <b>12/15/68</b>	<input type="checkbox"/>
		23 During 12-month NL accrual period (total)	<input type="checkbox"/>

5-71-70

70-1271

70-1556

Mr. Barnes N. Hidalgo, Jr.  
 403 Silver Rock Road  
 Rockville, Maryland 20851

31 MAR 1970

Dear Mr. Hidalgo:

As you bring to a close more than twenty years of service to your country, I want to join your friends and co-workers in wishing you well and hoping that you find the years ahead filled with enjoyment and satisfaction.

It takes the conscientious efforts of many people to do the important work of this Agency. You leave with the knowledge that you have personally contributed to our success in carrying out our mission. Your faithful and loyal support has measured up to the high ideals and traditions of the Federal service.

May I express to you my appreciation and extend my best wishes for the years ahead.

Sincerely,

*Richard Helms*  
 Richard Helms  
 Director

## Distribution:

0 - Addressee  
 1 - DDCI  
 1 - ER  
 1 - C/EAB/OS  
 1 - D/Pers  
 1 - OPF  
 1 - ROR Soft File \*Concur  
 1 - FOB Reader

## Originator:

Director of Personnel  
 C/EAB/OS

OP/RAD/ROR/ [redacted] at 3257 (5 March 1970)

P B SEP 1970

Mr. Raines N. Hidalgo, Jr.  
403 Silver Rock Road  
Rockville, Maryland 20851

Dear Mr. Hidalgo:

It is the practice of the Organization to follow up with former employees six months after their retirement. We hope by such inquiry to obtain information on what our retirees are doing and where they are located, invite suggestions for improving the retirement program and to learn if the Organization might be of some assistance on any post-retirement matters.

We should like very much to hear from you on the above points and on any other topics you think would be useful to us.

For your convenience in replying, we have enclosed a sheet somewhat akin to a form on which we have listed those standard items of information we'd like to have on every retiree. The remainder of the sheet, including the reverse side, is for your comments and suggestions. We shall be most appreciative of your fullest response to this inquiry.

Thank you very much for your cooperation.

Sincerely yours,

Carroll A. Duchay  
Personnel Officer

Enclosures:  
Questionnaire  
Return Envelope

Distribution:  
Original - Addressee  
1 - OPF  
1 - RAD Subject's File

OP/RAD/EFAB/ dag (31 Aug 70)

SECRET

(When Filled In)

DDJ: 14 MAR 70

## NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)						
027630		HIT DALCO, GUYANA						
3. NATURE OF PERSONNEL ACTION RETIREMENT-DISABILITY-UNDER CTA RETIREMENT AND DISABILITY SYSTEM		4. EFFECTIVE DATE MO DA YE						
5. FUNDS V TO V CF TO V		6. V TO CF CF TO CF						
7. FINANCIAL ANALYSIS NO: Chargeable		8. CSC OR OTHER LEGAL AUTHORITY P.L. 88-643 Sect. 1423						
9. ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 2 SECTION:		10. LOCATION OF OFFICIAL STATION WASH. D.C.						
11. POSITION TITLE CPS OFFICER		12. POSITION NUMBER 1310						
14. CLASSIFICATION SCHEDULE GS (B, MC) GS		15. OCCUPATIONAL SERIES 0138.01						
16. GRADE AND STEP 12 5		17. SALARY OR RATE 13173						
18. REMARKS								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE 45	20. EMPLOYEES CODE 10	21. OFFICE CODING NUMERIC	22. STATION CODE ALPHABETIC	23. INTEGEE CODE	24. MARS CODE	25. DATE OF BIRTH MO DA YE	26. DATE OF GRADE MO DA YE	27. DATE OF RET. MO DA YE
28. NTE EXPIRES NO. DA YE	29. SPECIAL REFERENCE CSC 2 FICA 3 NON	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE TYPE	32. CORRECTION / CANCELLATION DATA CODE	33. SECURITY REG. NO.	34. SET		
35. VET PREFERENCE CODE 0 NONE 1-5 PT 2-10 PT	36. SERV. COMP. DATE MO DA YE	37. LONG COMP. DATE MO DA YE	38. CAREER CATEGORY CAR: BUSY PROV: TEMP	39. FEGL - HEALTH INSURANCE CODE CON 0 WAIVER 1 YES 2 NO	40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS.) 3 BREAK IN SERVICE (MORE THAN 3 YRS.)	42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED 1 YES 2 NO	44. STATE TAX DATA FORM EXECUTED 1 YES 2 NO					
SIGNATURE OR OTHER AUTHENTICATION				POSTED 63-05-70 jsc				

FORM 5-66 1150 Use Previous Edition  
Mfg 10-67

SECRET

BBG

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BSW: 14 MAR 70

## NOTIFICATION OF PERSONNEL ACTION

<b>CSP</b>				
1. SOCIAL NUMBER	2. NAME (LAST FIRST MIDDLE)			
027630	MIDALOO D N JR			
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		
RETIREMENT-DISABILITY-UNDER CIA RETIREMENT AND DISABILITY SYSTEM		02 28 70		
5. FUNDS	V TO V	V TO GP	6. CATEGORY OF EMPLOYMENT	
X	CP TO V	CP TO CP	REGULAR	
7. Financial Analyst No Charged				
8. CSC OR OTHER POLITICAL AUTHORITY				
0235 0620 0000 P.L. 88-843 SECT. 231				
10. LOCATION OF OFFICIAL STATION				
11. POSITION TITLE				
CSP OFFICER				
12. POSITION NUMBER		13. SERVICE DESIGNATION		
1310		D		
14. CLASSIFICATION SCHEDULE (GS, LS, OR)		15. OCCUPATIONAL SERIES		
GS		0136.01		
16. GRADE AND STEP		17. SALARY OR RATE		
12.5		13173		
18. REMARKS				
SIGNATURE OR OTHER AUTHENTICATION				

PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 222 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF COMMISSIONER OF THE CIVIL SERVICE IN THE CIV ACT OF 1969, AS AMENDED, AND A DCI DIRECTIVE DATED OCTOBER 1968.

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	GRADE	SEPTAL OF PAY FUNDS OR STEP	SALARY
HIDALGO B N JR	027630	51 390 V	\$13,173

1. SERIAL NO.	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS					
027630	HIDALGO B N JR	51 390	V						
OLD SALARY RATE		NEW SALARY RATE		B. TYPE ACTION					
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ
GS 12	4	\$13,392	12/18/68	GS 12	9	\$13,798	12/19/68		

CERTIFICATION AND AUTHENTICATION

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE: *Entomell* DATE: *10 October 68*

NO EXCESS LWOP           

IN PAY STATUS AT END OF WAITING PERIOD

LWOP STATUS AT END OF WAITING PERIOD

CLEER'S INITIALS: *K B D L S*

FORM 560 E Use previous  
7-68 editions PAY CHANGE NOTIFICATION 14-311 JP

14 00000  
"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 A-D 216 OF PL 90-266 AND EXECUTIVE ORDER 11613 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-CDC DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	CH-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	027630	SI 350	V	GS 12 4	\$12,607	\$13,392

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-266 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-CDC DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	CH-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	027630	SI 350	V	GS 12 4	\$12,604	\$12,607

14 0000

c/wk12

6 30

SECRET  
REF ID: A65105

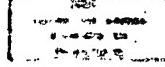
## NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (LAST-FIRST MIDDLE)		3. EFFECTIVE DATE		4. CATEGORY OF EMPLOYMENT
027630	HAGGU B N JR		1976-08-01		REGULAR
5. NATURE OF PERSONNEL ACTION		6. POSITION NUMBER		7. COST CENTER NO CHARGEABLE	
DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM		14160		8. CSC OR OTHER LEGAL AUTHORITY	
8. FUNDS		9. TO V	10. O	11. C	12. E
X		(P 10 V)	(P 10 O)	(C)	13. 2643 DECT. 20/3
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION			
DOP/WI		WASH., D. C.			
11. POSITION/TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION	
14. CLASSIFICATION SCHEDULE (SEE LR. ON)		15. OCCUPATIONAL SERIES		16. SALARY AND STEP	
				17. SALARY OR RATE	
18. REMARKS YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE REGULATIONS OF THE DOD. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION BY Agency	20. OFFICE CODING	22. STATION, 23. LATITUDE	24. Name	25. Date of Birth	26. Date of Hiring
CODE	Code	CODE	CODE	MM DD YY	MM DD YY
20. RTO EXPENS	21. SPECIAL DIFFERENCE	22. RETIREMENT DATA	23. SEPARATION DATA	24. CONVERSATION COMMISSION DATA	25. SECURITY
MM DD YY		CODE	DATA CODE	CODE	REG. SEC
25. RET. PREFERENCE	26. SEED COMP DATE	27. 1986 COMP DATE	28. CREDIT COVERAGE	29. RETIREMENT BENEFITS	30. SOCIAL SECURITY
CODE	MM DD YY	MM DD YY	CODE	CODE	CODE
31. PREVIOUS GOVERNMENT SERVICE DATA	32. LEAVE CAC	33. RETIREMENT DATA	34. DATA	35. DATA	36. DATA
CODE	CODE	CODE	CODE	CODE	CODE
SIGNATURE OF PERSONNEL ACTION					

1000 1130

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Three Pines

PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504  
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962.

EFFECTIVE DATE OF PAY ADJUSTMENT IS JULY 1966

NAME	SERIAL NUMBER	GRADE	OLD SALARY	NEW SALARY
MEDALLO H N JR	027630	SI 550	\$1,350	\$1,685

EMPLOYEE		Date	WAITING PERIOD		END OF PAY	
027630	MEDALLO H N JR		SI 550	7		
OLD SALARY RATE			NEW SALARY RATE		TYPE ACTION	
Rate	Step	Month	Rate	Step	Month	AD
65 17 2	30,907	12/20/64	65 17 7	31,355	12/21/65	

NO EXCESS LWOP  
IN PAY STATUS AT END OF WAITING PERIOD  
LWOP STATUS AT END OF WAITING PERIOD  
CLERKS INITIALS: AUDITED BY:

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS  
OF AN ACCEPTABLE LEVEL OF COMPETENCE

SIGNATURE: *C. J. Hill*  
PAY CHANGE NOTIFICATION

JH: 17 DEC 65

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																	
OCF																	
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)															
027630		HIDALGO B N JR															
3. NATURE OF PERSONNEL ACTION																	
REASSIGNMENT																	
4. FUNDS		X 10 0		Y 10 0		5. EFFECTIVE DATE											
						12 19 65				6. CATEGORY OF EMPLOYMENT							
7. COST CENTER NO. CHARGEABLE										8. CSC OR OTHER LEGAL AUTHORITY							
6235 0620 0000										50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS										10. LOCATION OF OFFICIAL STATION							
DDP/WH BRANCH 2										WASH., D.C.							
SECTION																	
11. POSITION TITLE					12. POSITION NUMBER			13. SERVICE DESIGNATION									
OPS OFFICER					1318			D									
14. CLASSIFICATION SCHEDULE (FSC, GS, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE										
GS			0136.01		12 3		11355										
18. REMARKS																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. ACTION CODE		20. EMPLOYEE CODE		21. OFFICE CODING		22. STATION CODE		23. INTELLIGENCE CODE		24. GRADE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEA	
37		10		51350		WH		75013		1		05 27 19		00 00 00		00 00 00	
28. WTC EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA		32. CORRECTION/CANCELLATION DATA		33. SECURITY INFORMATION		34. SSN		35. MEDICAL		36. SOC. SEC. NO.	
NO 04 04 70		REFERENCE		TYPE		DATA CODE		TYPE		NO 04 70		REF NO		NAME		REF NO	
37. VET PREFERENCE		38. SERV COMP DATE		39. LONG COMP DATE		40. CAREER CATEGORY		41. DISABILITY / HEALTH INSURANCE		42. SOCIAL SECURITY NO							
CODE		0 0000 00 00		0 0000 00 00		0 0000 00 00		0 0000 00 00		0 0000 00 00							
43. PREVIOUS GOVERNMENT SERVICE DATA		44. LEAVE CAT CODE		45. FEDERAL TAX DATA		46. STATE TAX DATA											
CODE		0 0000 00 00		0 0000 00 00		0 0000 00 00											
0. NO PREVIOUS SERVICE 1. NO SERVICE IN SERVICE 2. SERVICE IN SERVICE LESS THAN 1 DAY 3. SERVICE IN SERVICE MORE THAN 1 DAY		0 0000 00 00		0 0000 00 00		0 0000 00 00											
SIGNATURE OR OTHER AUTHENTICATION																	

FORM 1150  
11-67

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14 00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301  
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 4 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
HIDALGO R N JR.	027630	31 500	V	GS 12 2	\$10,605	\$10,987

SECRET  
(When filled in)

## NOTIFICATION OF PERSONNEL ACTION

OCS: 04/27/65

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
027610		HIDALGO, B. N. JR.		REASSIGNMENT		05 31 65			
6. FUNDS		X	V 10 V		V 10 C			7. COST CENTER NO CHARGEABLE	
			0 10 V		0 10 C			8. CSC OR OTHER LEGAL AUTHORITY	
9. ORGANIZATIONAL DESIGNATIONS		DDP/WH DIVISION WH C MIAMI OPS BR FI SEC				10. LOCATION OF OFFICIAL STATION			
11. POSITION TITLE		12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION					
OPS OFFICER		1145		D					
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0136.01		12					
18. REMARKS									
POSTED <u>6-9-65 HT</u>									
SIGNATURE OR OTHER AUTHENTICATION									

GFC PAYROLL CHAN

Dec 22, 1968

3GF

1. Serial No.	2. Name	3. Civil Service Number	4. LWOP Month							
027630	HIGALGO B N JR	49 997	431							
5. OLD SALARY RATE		6. NEW SALARY RATE								
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSD	ADJ.
GS 12	1	\$10,250	12/22/63	GS 12	2	\$10,605	12/20/64			
8. Remarks and Authorization										
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS: <i>[Signature]</i> AUDITED BY <i>[Signature]</i>										
I CERTIFY THAT THE WORK OF THE ABOVE-NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE <i>[Signature]</i> DATE <i>4</i> <i>[Signature]</i>										
PAY CHANGE NOTIFICATION										

Form 500

October Previous Edition

(4-51)

**SECRET**  
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MHC: 2 NOV 64

**NOTIFICATION OF PERSONNEL ACTION****OCF**

1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)		
027630	HIDALGO B N JR		
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT		11 02 64	REGULAR
6. FUNDS	X	V TO V	V TO CF
		CF TO V	CF TO CF
7. ORGANIZATIONAL DESIGNATIONS		8. COST CENTER NO. CHARGEABLE	
DDP/SAS COUNTERINTELLIGENCE STAFF OPERATIONS SECTION		5235 1162 0000 50 USC 403 J	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER		0887	D
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP
GS		0136.01	12 1
17. REMARKS		18. LOCATION OF OFFICIAL STATION	
		WASH., D. C.	
19. ACTION CODE			
37	10	49150	SAS
20. OFFICE CODING			
Numeric	Alphabetic	22. STATION CODE	23. INTEGEE CODE
75013			1
24. DATE OF BIRTH			
NO DA YR		05 27 19	
25. DATE OF GRADE			
NO DA YR		NO DA YR	NO DA YR
26. SECURITY REQ NO			
27. DATE OF LEI			
28. SPECIAL REFERENCE			
NO DA YR	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA
	CODE	TYPE	NO DA YR
1 - CSC 2 - FICA 3 - NONE			
33. SEX			
34. SOC. SECURITY NO			
35. VET. PREFERENCE			
CODE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY
0 - NONE 1 - BPT 2 - 10 PT	NO DA YR	NO DA YR	CODE
			0 - WAIVER 1 - YES
39. FEGL / HEALTH INSURANCE			
40. STATE TAX DATA			
41. PREVIOUS GOVERNMENT SERVICE DATA			
CODE	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS), 3 - BREAK IN SERVICE (MORE THAN 3 YRS)		FORM EXECUTED CODE	NO TAX EXEMPTIONS FORM EXECUTED CODE
		1 - YES 2 - NO	1 - YES 2 - NO
45. SIGNATURE OR OTHER AUTHENTICATION			
FROM: DEV COMP 2		FOLTD 11/27/64 - JK	

FORM 11-62 1150

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**SECRET**

REF ID:  
E443142  
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14 00000  
(When Filled In)

ADJUSTMENT OF SALARY RATE IN ACCORDANCE WITH THE SCHEDULES OF THE GOVERNMENT EMPLOYEES SALARY REFORM ACT OF 1964 PURSUANT TO THE AUTHORITY OF THE DIRECTOR OF CENTRAL INTELLIGENCE AS PROVIDED IN THE CENTRAL INTELLIGENCE AGENCY ACT OF 1949, AS AMENDED, AND POLICY DIRECTIVE ISSUED BY THE ACTING DIRECTOR OF CENTRAL INTELLIGENCE DATED 8 OCTOBER 1962.

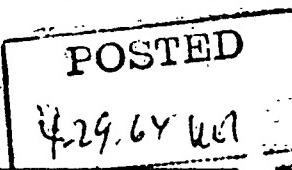
**SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE  
AND STEP AS INDICATED IN CHART BELOW.**

**GENERAL SCHEDULE RATES**  
**Federal Employees Salary Act of 1964**

**SECRET**  
(When Filled In)

DPR: 28 APR 64

**NOTIFICATION OF PERSONNEL ACTION**

1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
027530		HIDALCO, E. N. US		MO	DA	YR	REGULAR		
6. FUNDS		V TO V	V TO CP	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
		CP TO V	CP TO CP	4232 1980 1000		DOD-USC 403			
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION							
DDP/SAS CS/CS DEVELOPMENT COMPLEMENT		WASH., D.C.							
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION					
OPS OFFICER		2227							
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
CS		0130.01		12.1		2280			
18. REMARKS OTHER									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY. CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGRITY CODE	24. MOBILIS. CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI	
13	16	42327	SAS	22013	1	05 12 27 19	12 22 13	12 22 13	
28. MTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	PIPE	MO DA YR	EOD DATA	33. SECURITY REG. NO	34. SEX
NO DA YR		1 CSC 2 FICA 3 NONE	CODE					00000	M
35. VET PREFERENCE	36. SERV COMP DATE	37. LONS COMP DATE	38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE	40. SOCIAL SECURITY NO				
CODE	0 NONE 1 3 77 2 10 PT	MO DA YR	MO DA YR	CODE	CODE	0 MAILED	HEALTH INS CODE		
0	07 11 64	03 11 64	17 15 64	IP	1	3 YES			
41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE ACT	43. FEDERAL TAX DATA	44. STATE TAX DATA						
CODE	CODE	NO. EXECUTED COGS	NO. TAX EXEMPTIONS	NO. EXECUTED	CODE	NO. TAX EXEMPT	STATE CODE		
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 3 YEARS 3 - BREAK IN SERVICE MORE THAN 3 YEARS		1 YES 2 NO	0	1 YES 2 NO					
SIGNATURE OR OTHER AUTHENTICATION									
									

FORM 11-62 1150

Our Previous Edition

28 APR 1964

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DATA 1  
Entered into records  
Date May 19  
Official copy

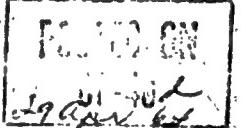
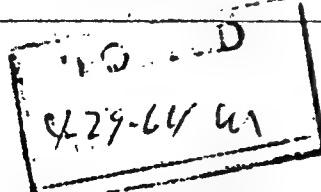
(When Filled In)

**SECRET**

(When Filled In)

SF 101-29 APR 64

**NOTIFICATION OF PERSONNEL ACTION**

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
027-30		Kirkpatrick, B K Jr		RESIGNATION		04 25 164		REGULAR	
6. FUNDS		V TO V	V TO CF	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	4132 2001 1000					
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION							
DOP/SAS US FIELD FORWARD OPERATIONS STATION- JMWave CI SECTION		JMWave							
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION					
OPS OFFICER		0731		D					
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0130;01		12 1		9190			
18. REMARKS									
 <i>19 Apr 64</i>									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. Employ Code	21. OFFICE CODING		22. STATION CODE	23. INTEGRITY CODE	24. Hdrgrs Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
45	10	NUMERIC	ALPHABETIC			NO DA VR	NO DA VR	NO DA VR	NO DA VR
28. OTC EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SECURITY REG NO		34. SER NO	
00 0A 0B			1. CSC 2. FICA 3. NONE	0008	TYPE	NO DA VR			
35. RET. PREFERENCE		36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE	40. SOCIAL SECURITY NO			
0226 0. NONE 1. SPT 2. 10 PT		NO DA VR	NO DA VR	EAR BNSY PNSY TAMP	CODE	0. WATER	HEALTH INS CODE		
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA					
0226 0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE LESS THAN 3 MOS 3. BREAK IN SERVICE (MORE THAN 3 MOS)			FORM EXECUTED CODE	NO TAX EXEMPTIONS	FORM EXECUTED	0. YES	NO TAX CASHP	STATE CODE	
SIGNATURE OR OTHER AUTHENTICATION									
 <i>429-64 61</i>									

5244 1150  
11-62

Use Previous Edition

**SECRET**28 APR 64  
286

GROUP I  
Excluded from automatic  
downgrading and  
declassification

14-011  
(When Filled In)

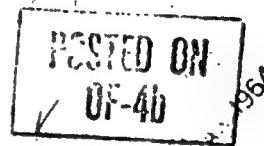
14 00000

525  
01

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCT  
MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS:  
EFFECTIVE 3 JANUARY 1964.

NAME	SERIAL	ORGN FUNDS	GR-ST	OLD SALARY	NEW SALARY
[REDACTED]	027630	49 730	CF GS 12 1	\$ 9,475	\$ 9,980

Hidalgo, L. H. Jr.



**SECRET**  
(When Filled In)

300-1201DEC-63

**NOTIFICATION OF PERSONNEL ACTION**

NOTIFICATION OF PERSONNEL ACTION										
1. SERIAL NUMBER.		2. NAME (LAST, FIRST, MIDDLE)								
027536		Hidalgo, RIK Jr.								
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE							
PROMOTION			12/22/63							
5. FUNDS			V TO V	V TO CP	6. COST CENTER NO. CHARGEABLE			7. CATEGORY OF EMPLOYMENT		
			CP TO V	X	CP TO CP	4132 2001 1000			REGULAR	
8. ORGANIZATIONAL DESIGNATIONS			9. LOCATION OF OFFICIAL STATION							
DDF SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE C.I. SECTION			JMWAVE							
10. POSITION TITLE			11. POSITION NUMBER			12. SERVICE DESIGNATION				
OPS. OFFICER			0731			D				
13. CLASSIFICATION SCHEDULE (GS, LS, etc.)			14. OCCUPATIONAL SERIES			15. GRADE AND STEP			16. SALARY OR RATE	
GS			0136.01			12 1			9117E	
17. REMARKS										
36 RICK JR										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION	20. Employ. CODE	21. OFFICE CODING	22. STATION CODE	23. INGREE CODE	24. HQ/Gen. Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI		
22	10	40730 SAS	022101	?	MO DA YR	MO DA YR	MO DA YR	MO DA YR	12/22/63 12/22/63	
28. HIRE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA					33. SECURITY REQ. NO.	
NO DA YR		1. CSC 2. FICA 3. NONE	CODE	TYPE	NO DA YR	NO DA YR	NO DA YR	NO DA YR	34. SEC	
35. VET PREFERENCE	36. SERV. COMP. DATE	37. LONG. COMP. DATE	38. CAREER CATEGORY	39. FEGLI / HEALTH INSURANCE					40. SOCIAL SECURITY NO.	
CODE	MO DA YR	MO DA YR	CAR BILN- PROV STATE	CODE	CODE	O WAIVER	HEALTH INS COF			
1. 99 2. 99 PT						1. YES				
41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA							
CODE		FORM EXECUTED CODE	NO. OF TAX EXEMPTIONS	FORM EXECUTED	CODE	NO. OF TAX EXEMPT	STATE CODE			
1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE LESS THAN 3 MONTHS 4. BREAK IN SERVICE MORE THAN 3 MONTHS		1. YES 2. NO		1. YES 2. NO		1. YES 2. NO				
SIGNATURE OR OTHER AUTHENTICATION										
12/27/63 RIK										

FORM 1150  
11-63

Use Previous  
Edition

**SECRET**

၁၀၆၂

1980-1  
LAWRENCE  
BROWN

When Filled In

SECRET  
(When Filled In)

LLG: 25 APRIL 63

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
02-716-30		Hirage		EXCEPTED APPOINTMENT CAREER PROVISIONAL		1963-04-28		REGULAR			
6. FUNDS		V TO V	V TO C	7. COST CENTER NO. CHARGEABLE		8. CSC OR JINR LEGAL AUTHORITY					
		CP 10 V	CP 10 C	3132 2001 1000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-UWAVE CJ SECTION						UWAVE					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						0732		O			
14. CLASSIFICATION SCHEDULE (US, TD, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP		17. SALARY OR RATE			
GS			0136.01			11 4		8840			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGEE CODE	24. HEIGHT (CM)	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI		
13	10	61730		SAS	99939	2	05 27 19	03 17 58	09 16	62	
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REF ID	34. SEX	
									27630	M1	
35. VET. PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGL / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE 0 - NONE 1 - 9 PT 2 - 10 PT		MO DA YR		MO DA YR		CAN REG CODE PHON TEMP		CODE P 1 YES		HEALTH INS CO & STATE	
41. PREVIOUS GOVERNMENT SERVICE DATA						42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA	
						CODE 1 YES 2 NO		FORM EXECUTED CODE 0 0		FORM EXECUTED CODE 1 YES 2 NO	
SIGNATURE OR OTHER AUTHENTICATION											
POSTED 15/04/63 JK											

FORM 1150  
11-62Use Previous  
EditionSECRET 25 APR  
196314-811  
FEDERAL PAY RATES  
APRIL 1963  
1963

(When Filled In)

SECRET  
(When Filled In)

RRR: 25 APR 63

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
027030		HIDALCO D N JR									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
RESIGNATION				CH 27 63		REGULAR					
6. FUNDS		X	V TO W	V TO CP		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
			C TO V	C TO CP		3232 1000 1000					
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION									
DDP/SPECIAL AFFAIRS STAFF FI/CI BRANCH		WASH., D.C.									
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS OFFICER		0592		D							
14. CLASSIFICATION SCHEDULE (GS, LS, WH)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0136.01		11-4		8940					
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGEE CODE	24. Grade Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI		
45	10	NUMERIC	ALPHABETIC			05	NO DA YR	NO DA YR	NO DA YR		
28. RTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. TYPE	34. NO. DA YR	35. SECURITY REG NO	36. SEC		
				1ED00031		ZOD DATA					
35. VET PREFERENCE		36. SERV COMP. DATE	37. LONG COMP. DATE	38. CAREER CATEGORY	39. FEGLI / HEALTH INSURANCE	40. SOCIAL SECURITY NO					
CODE		NO DA YR	NO DA YR	NO DA YR	CODE	CODE	D WAIVER	HEALTH INS CODE			
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA					
CODE		0 - NO PREVIOUS SERVICE 1 - NO GOVERNMENT SERVICE 2 - BREAK IN SERVICE LESS THAN 3 YEARS 3 - BREAK IN SERVICE MORE THAN 3 YEARS		FORM EXECUTED CODE 1 - YES 2 - NO		NO TAX EXEMPTIONS		FORM EXECUTED	CODE	45. TAX STATE CODE EXEMPT	
SIGNATURE OR OTHER AUTHENTICATION											
POSTED <i>[Signature]</i> <i>ost/ci 3/21K</i>											

SECRET  
(When Filled In)

ABM: 20 NOV 62

NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)											
027630		HICALGO, B N JR											
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
REASSIGNMENT				11 20 62		REGULAR							
6. FUNDS		X	V TO V	V TO W		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
			O TO V	O TO O		3232 1000 1000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION									
DDP TASK FORCE "W" FI-CI BRANCH				WASH., D. C.									
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION							
OPS OFFICER				0682		D							
14. CLASSIFICATION SCHEDULE (ES, EL, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE						
GS			0136.01		11 4		8840						
18. REMARKS													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGRITY CODE	24. RATING CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI				
37	10	61300 TFW		75013	1	05 27 19	W. DA. YR.	W. DA. YR.	W. DA. YR.				
28. HIRE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SECURITY REG NO		34. SEX				
MO DA. YR				Y - CRC D - PICA N - NONE	CODE	TYPE	MO DA. YR	EOD DATA	REG NO				
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LGCS COMP. DATE	38. CAREER CATEGORY	39. FEGLI, HEALTH INSURANCE	40. SOCIAL SECURITY NO						
CODE		O - NONE S - DPT E - TOT		W. DA. YR	W. DA. YR	CODE	CODE	O - DRIVER E - YES	CODE				
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT	43. FEDERAL TAX DATA	44. STATE TAX DATA							
CODE				CODE	CODE	CODE	45. TAX EXEMPTIONS	FORM EXECUTED	CODE	NO TAX	STATE CODE		
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 yrs) 3 - BREAK IN SERVICE (MORE THAN 3 yrs)					1 - YES 2 - NO		1 - YES 2 - NO	1 - YES 2 - NO					
SIGNATURE OR OTHER AUTHENTICATION													
POSTED <i>12/14/62 JK</i>													

FORM 4-62 7150

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SECRET

SECRET  
(When Filled In)

44-811

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND  
 DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS,  
 EFFECTIVE 16 OCTOBER 1962.

NAME	SERIAL DRN	OLD FUND'S GRST SALARY	NEW FUND'S GRST SALARY
HIDALGO B N JR	27630	11 4 3 8340	11 4 3 8840

235-1000

1 Serial No	2 Name	3 Cost Center Number	4 LWOP Hours							
27630	HIDALGO B N JR	64 075 V /								
5 OLD SALARY RATE				6 NEW SALARY RATE				7 TYPE ACTION		
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	Effective Date	PM	LSI	ADJ
RS 11 3	S 8,080	03/19/61		S 11 4	S 8,340	09/16/62				
8 Remarks and Authorizations										
✓ NO EXCESS LWP    ✓ EXCESS LWP ✓ IN PAY STATUS AT END OF WAITING PERIOD ✓ IN LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>JMC</i> AUDITED BY <i>WJ</i> <i>83 83 83 83 83 83 83 83 83 83 83 83</i>										
PAY CHANGE NOTIFICATION										

SECRET

(When Filled In)

AES: 17 JAN 62

## NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER:		2. NAME (LAST-FIRST-MIDDLE)		4. EFFECTIVE DATE:		5. CATEGORY OF EMPLOYMENT			
027630		HIDALGO B N JR		01	17 62	REGULAR			
3. NATURE OF PERSONNEL ACTION		6. COST CENTER NO CHARGEABLE		7. USC OR OTHER LEGAL AUTHORITY					
REASSIGNMENT		X	V TO V		V TO CF	2235 1000 1000		50 USC 403 J	
8. FUNDS		O TO V		CF TO CF					
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION							
DDP WH PLANS & OPERATIONS STAFF SECTION A		WASH., D.C.							
11. POSITION TITLE		12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION					
OPS OFFICER		0641		D					
14. CLASSIFICATION SCHEDULE (GS, GS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0136.01		11 3		8080			
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. Employ. Code	21. OFFICE CODING		22. STATION CODE	23. INTEGRITY CODE	24. HIRING CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
37	10	64075 WH		75013	1	05	27 19		
28. RTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG. NO.	34. SER. NO.	
NO DA TO		1-CAP 2-PICK 3-NONE		CODE	TYPE	NO EA OR	EOD DATA		
35. VET PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. MIL. SERV CREDIT/LCD	39. FED. MED. / HEALTH INSURANCE	40. SOCIAL SECURITY NO				
CODE	NO DA TO	NO DA TO	NO DA TO	CODE	NO	DA	HEALTH	CODE	
41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT	43. FEDERAL TAX DATA	44. STATE TAX DATA						
CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE
45. NO PREVIOUS SERVICE	46. NO BREAK IN SERVICE	47. BREAK IN SERVICE (LESS THAN 12 MOS)	48. BREAK IN SERVICE (MORE THAN 12 MOS)	49. NO TAX EXEMPTIONS	50. TAX EXEMPTIONS	51. NO TAX EXEMPTIONS	52. TAX EXEMPTIONS	53. NO TAX EXEMPTIONS	54. TAX EXEMPTIONS
SIGNATURE OR OTHER AUTHENTICATION									
E. J. M. 1/18/62 9m									

SECRET

(When filled in)

ARE: 18 AUG 1961

SECRET

## NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
027630		HIDALGO B N JR		08 20 61	00 00 00	REGULAR	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS				6. COST CENTER NO. CHARGEABLE 2635 5000 6021			
7. FUNDING → <input checked="" type="checkbox"/> X		V TO V	V TO CP	8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS DOP WH BRANCH 4 FI CI SECTION				10. LOCATION OF OFFICIAL STATION WASH., D. C.			
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0681		13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION/EXTRADISCIPLINARY PAY RATE GS		15. GRADE AND STEP 0136.01 11 3		16. SALARY OR PAY 8060			
17. REMARKS							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
18. ACTION		19. SERVICE CODING		20. STATION		21. INTEGEE	
CODE		CODE		CODE		CODE	
16 10 64450 WH		75013		1		05 27 19	
22. VTE EXPIRES		23. SPECIAL REFERENCE		24. RETIREMENT DATA		25. SEPARATION DATA	
NO DA TO		CODE		CODE		CODE	
1 10 64450 WH		6 78 9		1 10 64450 WH		1 10 64450 WH	
26. VET PREFERENCE		27. SERV COMP DATE		28. LONG COMP DATE		29. MIL SERV. CREDITED	
CODE		NO DD MM		NO DD MM		NO DD MM	
1 10 64450 WH		1 10 64450 WH		1 10 64450 WH		1 10 64450 WH	
30. PREVIOUS GOVERNMENT SERVICE DATA		31. LEAVE CAT		32. FEDERAL TAX DATA		33. STATE TAX DATA	
CODE		CODE		CODE		CODE	
1 10 64450 WH		1 10 64450 WH		1 10 64450 WH		1 10 64450 WH	
SIGNATURE OR OTHER AUTHENTICATION							
CPT HAN WJK							

**SECRET**  
(When Filled In)

1. Serial No.	2. Name			3. Cost Center Number			4. LWOP Hours			
527870	HIDALCO R N JR			DDP/WH 3A UV						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSD	ADL
ES	11	2	\$ 7,970	07/20/59	11	3	\$ 8,040	01/19/61		
8. Remarks and Authorizations										
<p>NO EXCESS LWOP</p> <p>IN PAY STATUS AT END OF WAITING PERIOD</p> <p>IN LWOP STATUS AT END OF WAITING PERIOD</p>										
<p>E D. F. H. S. C.I.K.</p> <p>PAY CHANGE NOTIFICATION</p>										

560

### Observe Previous Edition

**SECRET**

1234

4849

SECRET  
(When Filled In)

## NOTIFICATION OF PERSONNEL ACTION

ADPR 07/21/69

1. SERV. NUMBER 2. NAME (LAST, FIRST, MIDDLE)

027630

MICALUGO R N JR

3. NATURE OF PERSONNEL ACTION

CONV. TO CAREER EMPLOYEE STATUS

FUNDING



F 10 V

F 10 G

F 10 V

F 10 U

4. OCCUPATIONAL DESIGNATION

DDP/SAS

4. EFFECTIVE DATE

00 00 00

03 17 69

5. CATEGORY OF EMPLOYMENT

6. COST CENTER NO CHARGEABLE

7. EX. OR OTHER LEGAL AUTHORITY

4232 1990 1000

10. LOCATION OF OFFICIAL STATION

11. POSITION TITLE

12. POSITION NUMBER

13. CAREER EMPLOYEE DESIGNATION

U

14. CLASSIFICATION NUMBER (S) IF ANY

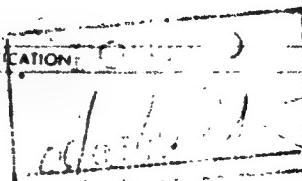
15. OCCUPATIONAL SERIES

16. GRADE AND STEP

17. SALARY OR RATE

18. REMARKS

SIGNATURE OR OTHER AUTHENTICATION



14 00000

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-368 AND DCI MEMO DATED  
1 AUGUST 1966, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1966.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
D	HIDALGO B N JR	527630	46 17	GS-11 2	\$ 7,270	\$ 7,820

7/87 EMMETT D. ECHOLS  
DIRECTOR OF PERSONNEL

SECRET

AES: 24 JUNE 1960

## NOTIFICATION OF PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Mar. Prod	5. Son	6. CS-EOB
527630	HIDALGO B N JR	Mo. Da. Yr. 05 27 19	19240 R100 S.A. 1 12 P. 2	M 1	83 19 38
7. CSC	8. CSC Permit	9. CSC Or Other Legal Authority	10. Appt. Authority	11. FEGLI	12. CSD
Mo. Da. Yr. 07 16 46	Yes. 1 Code 1	50 USCA 403 J	Mo. Da. Yr. No. 2	Mo. Da. Yr. 03 17 56	Yes. 1 Code 2

## PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code		
DDS OTR OPERATIONS SCHOOL COVERT TRAINING		1172 WASH., D. C.	75013		
16. Dept. Field	17. Position Title	18. Person No.	19. Serv		
Dept - 1 Code Unitd - 3 Frn - 3	INSTRUCTOR OPERS	1014	1711.50		
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number
11 2	\$ 7270	A	Mo. Da. Yr. 03 17 56	Mo. Da. Yr. 03 20 59	9 75013 30 018

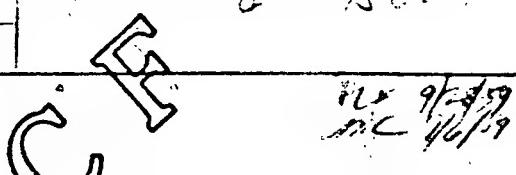
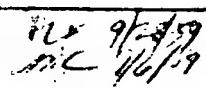
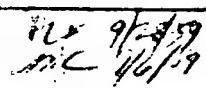
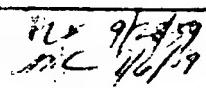
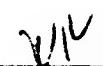
## ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Expense	Code	30. Separation Date
REASSIGNMENT	57	06 21 60	REGULAR	01	

## PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code		
DDP WH BRANCH 4		8617 WASH., D.C.	75013		
33. Dept. Field	34. Position Title	35. Person No.	36. Serv		
Dept - 1 Code Unitd - 3 Frn - 5	OPG OFFICER	0626	1711.50		
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number
11 2	\$ 7270	D	Mo. Da. Yr. 03 17 56	Mo. Da. Yr. 03 19 56	0135 1000 1000
44. Remarks	<div style="border: 1px solid black; padding: 10px; text-align: center;">           1            2            3              06-27-60 R/K         </div>				

**SECRET**  
DRAFT FILLER BY

1. EMP. SERIAL NO.	2. NAME			3. ASSIGNED GRADE	4. PAYGRADE	5. ALLOTMENT	
527630	HIDALGO B N JK			DDS/TRNG 21	UV		
6. OLD SALARY RATE				7. NEW SALARY RATE			
GRADE	STEP	SALARY	LAST EFFECTIVE DATE	GRADE	STEP	SALARY	EFFECTIVE DATE
GS 11	1	\$ 7,034 U3	17 56	GS 11	2	\$ 7,270	09 20 59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER							
8. CHECK ONE <input checked="" type="checkbox"/> 100% LWOP <input type="checkbox"/> 50% LWOP				9. NUMBER OF HOURS LWOP			
10. PAY STATUS AT END OF PREVIOUS PERIOD <input type="checkbox"/> 100% <input type="checkbox"/> 50%				11. PAY STATUS AT END OF CURRENT PERIOD <input type="checkbox"/> 100% <input type="checkbox"/> 50%			
12. AUTHENTICATION							
    							
13. REMARKS U 756							
14. AUTHENTICATION							
PERIODIC STEP INCREASE - AUTHENTICATION							

FEB 1959 \$600

**SECRET**

PERSONNEL FOLDER

SECRET

## NOTIFICATION OF PERSONNEL ACTION

JEC:12 JUNE 59

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vet. Prof	5. Soc.	6. CSC E&C
527630	HIDALGO B N JR	Mo. Da. Yr.	Non-A Code 5 Pt-1 10 Pt-2	M 1 03	Mo. Da. Yr. 03 17 59
7. SCD	8. CSC Recd:	9. CSC Or Other Legal Authority	10. Appn. Altitude	11. FEGLI	12. LCD
Mo. Dg. Yr. 07 16 46	Yes-1 Code No-2 1	50 USCA 403(b)	Mo. Da. Yr.	Yes-1 Code No-2 1	Mo. Da. Yr. 03 17 58

## PREVIOUS ASSIGNMENT

14. Organizational Designations		Code	15. Location Of Official Station		Station Code
DDP WH BRANCH 191 CENTRAL AMERICA SECTION		4613	WASH., D.C.		75013
16. Dept. - Field Dope - 1 Usd - 3 Tran - 5	17. Position Title Code 2 AREA OPS OF		18. Position No. 0486	19. Serv. 20. Occup. Series GS 0136.01	
21. Grade & Step 11 1	22. Salary Or Rate \$ 7030	23. SD D	24. Date Of Grade Mo. Da. Yr. 03 17 58	25. PSY Dps Mo. Da. Yr. 09 20 58	26. Appropriation Number 8 3500 20

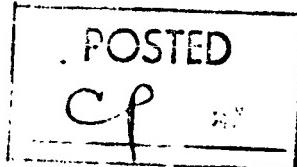
## ACTION

27. Nature Of Action REASSIGNMENT TRANSFER TO CONFIDENTIAL FUNDS	28. Type 05	29. Ent. Date Mo. Da. Yr. 06 14 50	30. Term Of Employment REGULAR	31. Separation Date 01
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## PRESENT ASSIGNMENT

31. Organizational Designations		Code	32. Location Of Official Station		Station Code
DDS OTR OPERATIONS SCHOOL COVERT TRAINING		1172	WASH., D.C.		75013
33. Dept. - Field Dope - 1 Usd - 3 Tran - 5	34. Position Title INSTRUCTOR SPERS		35. Position No. 1914	36. Serv. 37. Occup. Series IS 1711.50	
38. Grade & Step 11 1	39. Salary Or Rate \$ 7030	40. SD D	41. Date Of Grade Mo. Da. Yr. 03 17 58	42. PSY Dps Mo. Da. Yr. 09 20 58	43. Appropriation Number 8 7500 20 019

44. Remarks



S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE

12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 452 AND DCI

DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
HIDALGO R N JR	127630	GS-11-1	\$ 4,700	\$ 7,030

GORDON M. STEWART  
/S/ DIRECTOR OF PERSONNEL

S E C R E T

SECRET

(When Filled In)

## NOTIFICATION OF PERSONNEL ACTION

VL 16 MAY 58

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vet. Prof.	5. Sex	6. CS. EOD
127630	BALMES N. HIDALGO, JR.	Mo. Da. Yr. 05 27 19	None-U Code 5 Pt-1	M 1	Mo. Da. Yr. 03 17 58
7. SCD	8. CSC Rec'd.	9. CSC Or Other Legal Authority	10. Adm't Affidav.	11. FEGLI	12. LCD
Mo. Da. Yr. 07 16 58	Yes - 1 Code No - 2	50 USCA 303.d	Mo. Da. Yr. 03 13 58	Yes - 1 Code No - 2	Mo. Da. Yr. 03 17 58

## PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
16. Dept. Field	17. Position Title	18. Position No.	19. Serv. & 20. Occup. Ser. or
Dept - 8 USMld - 4 Sign - 6	Code		
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade 25. PSI Due 26. Appropriation Number
	\$		Mo. Da. Yr. Mo. Da. Yr.

## ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
EXCEPTED APPOINTMENT CORRECTION*	12	CR 171 58	REGULAR	01	

## PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code
DDP WH BRANCH 111 CENTRAL AMERICA SECTION	4613	WASH., D.C.	75013
33. Dept. Field	34. Position Title	35. Position No.	36. Serv. & 37. Occup. Series
Dept - 8 USMld - 4 Sign - 6	Code 2 AREA OPS OF	0436	GS 0136.01
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade 42. PSI Due 43. Appropriation Number
11 1	\$ 6300	8	Mo. Da. Yr. Mo. Da. Yr. 13 17 58 03 22 59

## 44. Remarks

\*THIS ACTION CORRECTS SF 1150 EFF 17 MAR 58, ITEM #2, THE NAME, WHICH READ BALMES N. HIDALGO TO READ BALMES N. HIDALGO, JR.

**SECRET**  
(When Filled In)

### NOTIFICATION OF PERSONNEL ACTION

LVL 17 MAR 58

1. Serial No.	2. Name (Last-First-Middle)			3. Date Of Birth	4. Vet. Prof	5. Sex	6. CS - EOD
127630	BALMES N. HIDALGO			Mo. Da. Yr.	None-O 5 Pt-1 10 Pt-2	Code 1 1	Mo. Da. Yr.
	HIDALGO BALMES N.			05 27 19		M 1	03 17 58
7. SCD	8. CSC Rec'd	9. CSC Or Other Legal Authority	10. Appt. Affidav.			11. FEGLI	12. LCD
Mo. Da. Yr.	Yes - 1 No - 2	Code 1 1	Mo. Da. Yr.	Yes - 1 No - 2	Code 1 1	Mo. Da. Yr.	Yes - 1 No - 2
07 16 36		50 USCA 403	03 13 53	03 17 53		03 17 53	

### PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code		
16. Dept. - Field	17. Position Title	18. Position No.	19. Serv.	20. Occup. Series	
Dept - 2 USMrd - 4 Frpn - 3	Code				
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number
	\$		Mo. Da. Yr.	Mo. Da. Yr.	

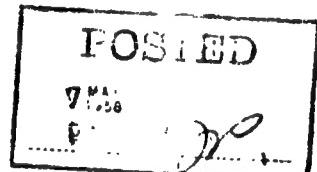
### ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
EXCEPTED APPOINTMENT	13	03 117 158	REGULAR	01	

### PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code		
DDP WH BRANCH 111 CENTRAL AMERICA SECTION	4613	WASH., D.C.	75013		
33. Dept. - Field	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series	
Dept - 2 USMrd - 4 Frpn - 6	Code 1 2	0486	US	0136.01	
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number
11 1	\$ 6790	D	03 117 158	09 120 159	8 3500 20

44. Remarks



14 00000

FITNESS RPTS  
1966 - 1969

**SECRET**

(This is Filled In)

<b>FITNESS REPORT</b>					<b>EMPLOYEE SERIAL NUMBER</b>	
<b>SECTION A</b>					<b>GENERAL</b>	
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
HITZMAN, PATRICK J., JR.			27 Aug 1919	M	GS-12	D
6. OFFICIAL POSITION TITLE Ops Officer			7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION DDP/HQ/C Headquarters		
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):	11. REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P. 15 March - 31 October 1965			12. REPORTING PERIOD (From to)			
<b>SECTION B</b> <b>PERFORMANCE EVALUATION</b>						
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>						
<b>SPECIFIC DUTIES</b>						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).						
SPECIFIC DUTY NO. 1 Headquarter desk officer responsible for the support of Miami Station CI/CE activities and operations.						RATING LETTER P
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi, and personnel.						RATING LETTER S
SPECIFIC DUTY NO. 3 Briefing representatives of foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.						RATING LETTER S
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.						RATING LETTER S
SPECIFIC DUTY NO. 5						RATING LETTER
SPECIFIC DUTY NO. 6						RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>						
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or hobbies, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S
4 JAN 1965						

**SECRET**

<b>SECTION C</b>		<b>NARRATIVE COMMENTS</b>	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B. Provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p> <p>Mr. Hidalgo is an able intelligence officer, devoted to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.</p> <p>An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible. He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.</p>			
<b>SECTION D</b>		<b>CERTIFICATION AND COMMENTS</b>	
<p>1. <b>BY EMPLOYEE</b>  <b>I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT</b></p> <p>DATE: 9 December 1965   SIGNATURE OF EMPLOYEE: <i>Susan L. Darling</i></p> <p>2. <b>BY SUPERVISOR</b>  <small>MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION</small>  8 months   <small>IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION</small></p> <p>DATE: 9 December 1965   OFFICIAL TITLE OF SUPERVISOR: C/WH/CMO/FI-CI   TYPED OR PRINTED NAME AND SIGNATURE: <i>Susan L. Darling</i></p> <p>3. <b>BY REVIEWING OFFICIAL</b>  COMMENTS OF REVIEWING OFFICIAL:</p> <p>I concur with the supervisor's assessment of Mr. Hidalgo with <del>the</del> exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.</p>			
DATE: 9 December 1965	OFFICIAL TITLE OF REVIEWING OFFICIAL: C/WH/CMO	TYPED OR PRINTED NAME AND SIGNATURE: <i>Walter T. Cini</i>	

**SECRET**

**SECRET**

(When Filled In)

<b>FITNESS REPORT</b>					<b>EMPLOYEE SERIAL NUMBER</b>
<b>SECTION A</b>					<b>027630</b>
<b>GENERAL</b>					
1. NAME <b>HIDALGO, Balme N.</b>	2. DATE OF BIRTH <b>27 May 1919</b>	3. SEX <b>M</b>	4. GRADE <b>12</b>	5. SD <b>D</b>	
6. OFFICIAL POSITION TITLE <b>Ops Officer</b>	7. OFF/DIV/BR OF ASSIGNMENT <b>DDP/SAS</b>	8. CURRENT STATION <b>Washington</b>			
9. CHECK (X) TYPE OF APPOINTMENT					10. CHECK (X) TYPE OF REPORT
CAREER	RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See Instructions - Section C)			XX ANNUAL	REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P. <b>31 January 1965</b>					12. REPORTING PERIOD (From - To) <b>9 April 1964-15 March 1965</b>
<b>SECTION B: PERFORMANCE EVALUATION</b>					
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					
<b>SPECIFIC DUTY NO. 1</b> Participated (with other WH/SA/CI officers) in the handling and debriefing of a defected intelligence officer housed in the Headquarters area.					RATING LETTER <b>S</b>
<b>SPECIFIC DUTY NO. 2</b> Served as Headquarters desk case officer for several counterintelligence operations--prepared cables, dispatches, and memoranda pertaining to these operations.					RATING LETTER <b>P</b>
<b>SPECIFIC DUTY NO. 3</b> Assisted in translations and preparation of operational documents in Spanish (s/w messages, cover letters, owl messages, etc.).					RATING LETTER <b>S</b>
<b>SPECIFIC DUTY NO. 4</b> Served as case officer for a counterintelligence operation (the agent was located in New York City) which included the debriefing, assessing, training, and dispatching of the agent to a denied area (Cuba).					RATING LETTER <b>P</b>
<b>SPECIFIC DUTY NO. 5</b>					RATING LETTER
<b>SPECIFIC DUTY NO. 6</b>					RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p> <p><b>29 MAR 1965</b></p>					
					RATING LETTER <b>S</b>

SECRET

(EX-1111-1)

**SECTION C****NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described if applicable.

Mr. Hidalgo's fluent knowledge of Cuban Spanish, his previous experience in DD/P Cuban operations, and his broad knowledge of Cuba (people, geography, customs, etc.) made him a particularly useful and versatile operations officer during his assignment in the WH/SA counterintelligence operations section. As indicated in Section B (specific duties) he performed a wide variety of duties.

Mr. Hidalgo approached and performed his assignments with enthusiasm, keenness, dedication, and promptness. He displayed a particular talent for conducting debriefings, and it was in this type activity that he performed best. He also writes well which added to his debriefing capability as well as to his performance as a Headquarters desk operations officer in writing cables, dispatches, memoranda, etc. Mr. Hidalgo is cost conscious and effective in the use of space, equipment and funds. He does not hold a supervisory position.

Mr. Hidalgo performed most of his duties with a minimum of supervision. In a few instances, however, he had a tendency (in his eagerness and desire to get the job done well) to become impatient with the slow and deliberate pace of progress which is sometimes necessary in operational activities. In these few instances, Mr. Hidalgo's work required supervision by a senior operations officer.

**SECTION D****CERTIFICATION AND COMMENTS**1. **BY EMPLOYEE**

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE 23 March 65

SIGNATURE OF EMPLOYEE

2.

**BY SUPERVISOR**MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

11 Months

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

23 March 1965

WH/SA/CI/COPS

Richard Tansing

3.

**BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

Mr. Hidalgo is a sound operations officer with native fluency in Spanish. His impatience is with administrative delays rather than with operational problems which he understands fully and handles well. He has had problems with his health but these largely have been overcome and in the past 9 months have not impeded his operational usefulness. As of the date of this fitness report, he appears fully capable of handling any CI or FI operation assigned to him.

DATE

23 MAR 65

OFFICIAL TITLE OF REVIEWING OFFICIAL

C WH/SA CI (WH/C/SP)

TYPED OR PRINTED NAME AND SIGNATURE

Harold F. Swenson

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 027630
<b>SECTION A</b>		<b>GENERAL</b>		
1. NAME	(First) [REDACTED]	(Middle) [REDACTED]	2. DATE OF BIRTH	3. SEX
			27 May 1919	Male
4. GRADE	5. SD	6. OFFICER POSITION TITLE	7. OFF/ DIV/ BR/ OF ASSIGNMENT	
GS-11	D	OPS OFFICER	JMWAVE	
8. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT		
CAREER	RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR
CAREER-PROVISIONAL (See Instructions - Section C)			ANNUAL	REASSIGNMENT EMPLOYEE
SPECIAL (Specify)		XX SPECIAL (Specify): Promotion		
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - To) 6 May 1963 to 5 September 1963		
<b>SECTION B</b> PERFORMANCE EVALUATION				
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>				
<b>SPECIFIC DUTIES</b>				
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).				
SPECIFIC DUTY NO. 1				RATING LETTER
To effect security screenings of PBRUMEN refugees arriving in the JMWAVE area from PBRUMEN in joint collaboration with ODENVY representatives.				S
SPECIFIC DUTY NO. 2				RATING LETTER
To interrogate PBRUMEN security suspects, surfaced by the above screenings and other means, in conjunction with representatives of the KUJUMP interrogation center [REDACTED] D.P. 24				S
SPECIFIC DUTY NO. 3				RATING LETTER
To supervise the interrogation efforts of three KUJUMP interrogators connected with the JMWAVE/KUJUMP KUDESK debriefing program.				P
SPECIFIC DUTY NO. 4				RATING LETTER
To prepare and present to his immediate supervisor completed interrogation reports.				P
SPECIFIC DUTY NO. 5				RATING LETTER
<div style="text-align: center; border: 1px solid black; padding: 5px;">POSTED ON</div> <div style="text-align: center; margin-top: 10px;">[Signature]</div>				RATING LETTER
SPECIFIC DUTY NO. 6				RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>				
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				
27 SEP 1963				
RATING LETTER				
S				

**SECRET**

(When Filled In)

**SECTION C****NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in mind the specific relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations if required. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Sep 26 2014  
 The person being rated is a conscientious devoted [redacted] who has demonstrated an extraordinary ability to get along with his co-workers and other ODYOKER representatives with whom he is collaborating. He receives his assignments cheerfully and with enthusiasm and approaches all of his tasks with great zeal. He devotes an inordinate amount of his own personal time to his duties in an effort to achieve perfection and sets very high standards for his own performance. The person being rated speaks native Spanish and is able to accomplish all of his interrogations in Spanish. This ability is a great asset to him in his work and redounds in benefits to the KUDESK effort of the Station.

The person being rated is an accomplished interrogator and thus receives very little guidance in his work. His ability to trap security suspects in contradictions is unique and is paying dividends in the WAVE KUDESK field of endeavor. He has shown mature judgment in the handling of complex security cases, balance in appraising the interrogation results and in recommending disposal action, and proficiency in the preparation of his interrogation reports. He is currently supervising the interrogation activities of three KUJUMP interrogators [redacted] and has shown an ability in establishing personal rapport with these interrogators and proficiency in directing their activities. It is recommended from the standpoint of his career development that after the completion of his current assignment, the person being rated be moved into an assignment involving the handling of agents in the KUDESK field of effort.

**SECTION D****CERTIFICATION AND COMMENTS**

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

4 months

At time preparation this report employee was on TDY Hqs and leave. Will be shown him upon return.

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

4 September 1963

Chief, CI Branch, JMWAVE (signed in pseudo on Fld. Trans.)

/s/ Neil T. PICKWORTH

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Subject is a hard working, dedicated, productive intelligence officer who has completely mastered those basic tools of the trade which are needed in CI activities. Subject has and uses native Spanish language fluency. Subject's performance during the period covered by this fitness report warrants an overall evaluation of "Strong." As a result, it is believed that Subject is a well-qualified journeyman who has earned a promotion to the grade of GS-12. Subject is strongly recommended for promotion to the grade of GS-12. Subject has additional growth potential as an intelligence officer. Subject's activities come to the attention of the Reviewing Officer on a bi-weekly basis.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

18 September 1963 Chief of Station, JMWAVE (signed in pseudo on Fld. Trans.)

/s/ Andrew K. REUTEMAN

**SECRET**

SECRET

(When Filled In)

<b>FITNESS REPORT</b>				EMPLOYEE SERIAL NUMBER <b>027630</b>
<b>GENERAL</b>				
1. NAME <b>HIDALGO, BALMES</b>		2. DATE OF BIRTH <b>27 May 1919</b>	3. SEX <b>M</b>	4. GRADE <b>GS-11</b>
5. OFFICIAL POSITION TITLE <b>Ops Officer</b>		7. OFF/DIV/BR OF ASSIGNMENT <b>DDP WH P&amp;O SEC A.</b>		6. SD <b>D</b>
8. CHECK (X) TYPE OF APPOINTMENT  CAREER    RESERVE    TEMPORARY  CAREER-PROVISIONAL (See Instructions - Section C)		10. CHECK (X) TYPE OF REPORT  ANNUAL    SPECIAL (Specify):		REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE
11. DATE REPORT DUE IN O.P. <b>30 October 1962</b>		12. REPORTING PERIOD (From To) <b>17 Jan 62 - 30 Sep 62</b>		
<b>SECTION B PERFORMANCE EVALUATION</b>				
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>				
<b>SPECIFIC DUTIES</b>				
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).				
SPECIFIC DUTY NO. 1  Responsible for initiation and development of WH Division durable assets program.				RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 2  Collate and maintain files on espionage laws of LA countries.				RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 3  Served as interpreter and translator for Division LA contacts.				RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 4  Coordinated with Branch 1 of WHD on FI and CI matters.				RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 5  Gives lectures as guest instructor to students attending School of International Communism.				RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 6				RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>				
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				RATING LETTER <b>I P</b>

**SECRET**

(When Filled In)

**SECTION C****NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.

It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.

**SECTION D****CERTIFICATION AND COMMENTS**

1.

**BY EMPLOYEE**

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

18 Sept 62

Albert J. Hidalgo

2.

**BY SUPERVISOR**MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

18 September 1962

C/WH/PO/A

CLARK E. SIMMONS

3.

**BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

I have had insufficient personal contact with Subject to make any meaningful comments.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
13 September 1962	C/WH/OPS	

**SECRET**

S E C R E T  
(When Filled In)

CERTIFICATION OF SEPARATING EMPLOYEE	Name (Last-First-Middle) Hidalgo, Barnes
--------------------------------------	---

## MEMORANDUM FOR THE RECORD - ATTACH TO OFFICIAL PERSONNEL FOLDER

I hereby acknowledge the receipt of the following forms and/or information concerning my separation from CIA as indicated by check mark:

1. Standard Form 8 (Notice to Federal Employee about Unemployment Compensation).
2. Standard Form 55 (Notice of Conversion Privilege, Federal Employees' Group Life Insurance). NA
3. Standard Form 56 (Agency Certification of Insurance Status, Federal Employers' Group Life Insurance Act of 1954).
4. Standard Form 2802 (Application for Refund of Retirement Deductions). Medical Disability
5. Form 2595 (Authorization for Disposition of Paychecks). NO CHANGE
6. Applicable to returnee (resignee from overseas assignment).  
I have been advised of my right to have a medical examination before my separation from this Agency and of the importance of such a medical check to my health and well-being.  
 Appointment arranged with Office of Medical Services.  
 Appointment for Office of Medical Services examination declined.
7. I have been informed of "conflict of interests" policy of the Agency and foresee no problem in this regard concerning my new employment.
8. Form 71 (Application for Leave).
9. CSC Pamphlet 51 (Re-employment Rights of Federal Employees Performing Armed Forces Duty).
10. Instructions for returning to duty from Extended Leave or Active Military Service.

Signature of Employee <i>Hector Hidalgo</i>	Date Signed Feb 27, 1970
Address (Street, City, State, Zip Code) 403 SILVER ROCK RD Rockville MD 20851	Correspondence <input checked="" type="checkbox"/> Overt <input type="checkbox"/> Covert
IR 40 VARIATION HIGHGRO X6646	SECRET

**SECRET**

**ELECTION, DECLINATION, OR WAIVER  
OF LIFE INSURANCE COVERAGE  
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM**

**IMPORTANT  
AGENCY INSTRUCTIONS  
ON BACK OF ORIGINAL**

**TO COMPLETE THIS FORM—**

**1 FOLLOW THESE GENERAL INSTRUCTIONS:**

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

**2**

**FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):**

NAME (last)	(first)	(middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER
HEDALOU Jr	Balmes	Nieves	May 27 1919	123 05 9966
Employee Serial Number 27630			LOCATION (City, State, ZIP Code)	
EMPLOYING DEPARTMENT OR AGENCY				

**3**

**MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):**

Mark here —  
if you  
WANT BOTH  
optional and  
regular  
insurance

 (A)

**ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE**

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here —  
if you  
DO NOT WANT  
OPTIONAL but  
do want  
regular  
insurance

 (B)

**DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE**

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here —  
if you  
WANT NEITHER  
regular nor  
optional  
insurance

 (C)

**WAIVER OF LIFE INSURANCE COVERAGE**

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

**4**

**SIGN AND DATE IF YOU MARKED BOX "A" OR "C".  
COMPLETE THE "STATISTICAL STUB." THEN RETURN  
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

DATE

13 February 1963

**FOR EMPLOYING OFFICE USE ONLY**

(official receiving date stamp)

OFFICE OF PERSONNEL  
89-HK 06 E 02 83

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

**SECRET**

STANDARD FORM NO. 170-2  
JAN. 1964  
(For use only until April 14, 1964)  
GSA GEN. REG. NO. 17-6-101

STANDARD FORM 61  
REVISED MARCH 1958  
U. S. CIVIL SERVICE COMMISSION  
F. P. M. CHAPTER 48

## APPOINTMENT AFFIDAVITS

**IMPORTANT.—Before swearing to these appointment affidavits, you should read and understand the attached information for appointee.**

CENTRAL INTELLIGENCE AGENCY

WASHINGTON, D.C.

(Department or agency)

(Bureau or division)

(Place of employment)

I, BALMES HIDALGO JR., do solemnly swear (or affirm) that—

### A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

### B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I knowingly a member of any organization that advocates the overthrow of the constitutional form of the Government of the United States, or which seeks by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) that I will not so advocate, nor will I knowingly become a member of such organization during the period that I am an employee of the Federal Government or any agency thereof.

### C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof. I do not and will not assert the right to strike against the Government of the United States or any agency thereof while an employee of the Government of the United States or any agency thereof. I do further swear (or affirm) that I am not knowingly a member of an organization of Government employees that asserts the right to strike against the Government of the United States or any agency thereof and I will not, while an employee of the Government of the United States or any agency thereof, knowingly become a member of such an organization.

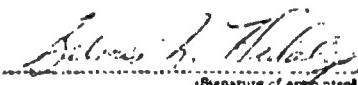
### D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing such appointment.

### E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

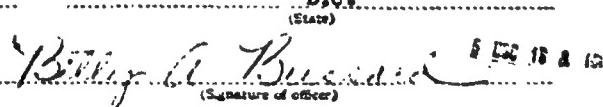
..... 17 Mar 58 .....  
(Date of entrance on duty)

  
(Signature of Appointee)

Subscribed and sworn before me this 13 th day of March A. D. 1958,

at Washington, D.C.  
(City)  
  
[SEAL]

D.C.s.  
(State)

  
(Signature of Clerk)  
Appointment Clerk  
(Title)

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

16-36100-6

**DECLARATION OF APPOINTEE**

This form is to be completed before entering on duty. Answer all questions. Admitted unfavorable information about such matters as arrests or discharges will be considered together with the favorable information in your record in determining your present fitness for Federal employment. However, a false statement or dishonest answer to any question may be grounds for dismissal after appointment and is punishable by law.

**E. PRESENT ADDRESS (Street and number, city and State)**  
16-7613 B. Elkridge Place NW - unit 301, D. C.

8. (A) DATE OF BIRTH (B) PLACE OF BIRTH (City and State or city and Province country)  
27 May 1919      Fort Meade, Maryland

(8) IN CASE OF EMERGENCY, PLEASE NOTIFY (9) RELATIONSHIP (10) STREET AND NUMBER, CITY AND STATE (11) TELEPHONE NO.  
670-2000, MARY ANN WEAVER, SISTER, 101 E. 10TH ST., KANSAS CITY, MO. 64106, (816) 221-1234

6. DOES THE UNITED STATES GOVERNMENT EMPLOY, OR EXERCISE CAPACITY, ANY RELATIVE OF YOURS (OTHER THAN BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS?  YES  NO

Name, for each such relative fill in the block below. If additional space is necessary, complete under Item 12.				
NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION OR (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MA- RI- ED  OR SIN- GLE (Check one)
		1. ....		
		2. ....		
		3. ....		
		4. ....		
		5. ....		
		6. ....		

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN		YES	NO	INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN		YES	NO
8. (A) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA, OR (B) AS A NATIVE OF AMERICAN SAMOA DO YOU OWE ALLEGIANCE TO THE UNITED STATES OF AMERICA?		<input checked="" type="checkbox"/>		10. (A) HAVE YOU EVER FILED A WAIVER OF LIFE INSURANCE COVERAGE UNDER THE FEDERAL EMPLOYEES GROUP LIFE INSURANCE ACT?		<input type="checkbox"/>	
9. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?		<input checked="" type="checkbox"/>		(B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELED OR REVOKED?		<input type="checkbox"/>	
<i>If your answer is "Yes," give details in Item 12.</i>							
11. DO YOU RECEIVE OR HAVE YOU APPLIED FOR AN INJURITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICES?		<input checked="" type="checkbox"/>		12. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN ARRESTED, CHARGED, OR HELD BY FEDERAL, STATE, OR OTHER LAW ENFORCEMENT AUTHORITY FOR ANY VIOLATION OF ANY FEDERAL, STATE, OR LOCAL LAW, COUNTY OR MUNICIPAL LAW, INCLUDING ONE THAT NAMELY, DO NOT INCLUDE TRAFFIC VIOLATIONS FOR WHICH A FINE OF \$500 OR LESS WAS IMPOSED. ALL OTHER CHARGES MUST BE INCLUDED EVEN IF THEY WERE DISMISSED.		<input type="checkbox"/>	
<i>If your answer is "Yes," give details in Item 12.</i>				(1) YOUR CONDUCT WAS NOT SATISFACTORY?		<input type="checkbox"/>	
13. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN ARRESTED, CHARGED, OR HELD BY FEDERAL, STATE, OR OTHER LAW ENFORCEMENT AUTHORITY FOR ANY VIOLATION OF ANY FEDERAL, STATE, OR LOCAL LAW, COUNTY OR MUNICIPAL LAW, INCLUDING ONE THAT NAMELY, DO NOT INCLUDE TRAFFIC VIOLATIONS FOR WHICH A FINE OF \$500 OR LESS WAS IMPOSED. ALL OTHER CHARGES MUST BE INCLUDED EVEN IF THEY WERE DISMISSED.		<input checked="" type="checkbox"/>		(2) YOUR WORK WAS NOT SATISFACTORY?		<input type="checkbox"/>	
<i>If your answer is "Yes," give details in Item 12 for each case. (1) approximate date, (2) charge, (3) place, (4) action taken.</i>				(3) YOUR CONDUCT WAS NOT SATISFACTORY?		<input type="checkbox"/>	
14. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN BANNED BY THE U.S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS?		<input checked="" type="checkbox"/>		(4) YOUR WORK WAS NOT SATISFACTORY?		<input type="checkbox"/>	
<i>If your answer is "Yes," give dates of and reasons for such disbarment in Item 13.</i>				15. SINCE YOU HAVE BEEN DISCHARGED FROM THE ARMED SERVICES UNDER OTHER THAN HONORABLE CONDITIONS?		<input type="checkbox"/>	
				<i>If your answer to A, B, or C is "Yes," give details in Item 13, clearly as you can remember, including the name and address of employer, approximate date, and reasons in each case.</i>		<input type="checkbox"/>	

**INSTRUCTIONS TO APPOINTING OFFICER.**—You must determine that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations, and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, any record of recent discharge or arrest, age, citizenship, and members of family. Also, to establish the identity of the appointee, you should particularly check (1) his signature and handwriting against the application and/or other pertinent papers and (2) his physical appearance against the medical certificate.

SECRET  
(Form Filled In)

LG

## QUALIFICATIONS UPDATE

## READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING, TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

Note that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information, however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplément to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13, Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form or your initiative.

SECTION I		BIOGRAPHIC AND POSITION DATA						
EMP. SER. NO.	NAME (Last-First-Middle)					DATE OF BIRTH		
027630	Hidalgo, Balme N. Jr.					05/27/19		
SECTION II		EDUCATION						
LAST HIGH SCHOOL ATTENDED		ADDRESS (City State Country)		YEARS ATTENDED (From To)		GRADUATE		
La Salle Academy		NYC NY		1938-1940		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
COLLEGE OR UNIVERSITY STUDY								
NAME AND LOCATION OF COLLEGE OR UNIVERSITY		SUBJECT	MAJOR	MINOR	YEARS ATTENDED FROM - TO -	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/OTR. HRS. (Specify)
NY University		Comm Law	TYP-ESP		1943-45	NO		
UNIV of MD		Fire engineering			1968	No Credit Course		
Mont Jr College		Real Estate Procedures			1968	No Credit Course		
IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.								
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS								
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION			FROM	TO	NO. OF MONTHS	
Suburban Hospital		Emergency Room procedures			EXAMINED	1968	3(?)	
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE		STUDY OR SPECIALIZATION			FROM	TO	NO. OF MONTHS	
Non-Con leadership school					194?		?	
SECTION III								
MARITAL STATUS								
1. PRESENT STATUS (Single, Married, Separated, Divorced, Annulled, Remarried) SPECIFY. MARRIED								
2. NAME OF SPOUSE		(Last)	(First)	(Middle)	(Wardens)			
		HIDALGO	Veronica		Waylonia Waylonia			
3. DATE OF BIRTH		4. PLACE OF BIRTH (City State Country)						
23 May 14		DuBois, Pa, USA						
5. OCCUPATION		6. PRESENT EMPLOYER						
Admin Asst		CIA						
7. CITIZENSHIP		8. FORMER CITIZENSHIP (If Countries)			9. DATE U.S. CITIZENSHIP ACQUIRED			
US		N/A			Birth			
SECTION IV								
DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE								
NAME		RELATIONSHIP	DATE AND PLACE OF BIRTH		CITIZENSHIP	PERMANENT ADDRESS		
1	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	1945 NYC NY		US	Arlington, Va		
2	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	1950 NYC NY		US	Alexandria Va		
FORM 444a 2-68		ADD	Mother	1892	SECRET SPAIN	US	ROCKVILLE MD	

(4) J.L.C. 14-911

SECRET

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL					
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF ENTRY	KNOWLEDGE ACQUIRED BY CHECK (X)	
Havana, Cuba Rep. of Panama El Salvador, Mexico Guatemala, Puerto Rico	Language, customs, people 1919-25 various various	1952-58	Dec 20	RECENT TRAVEL STUDY <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	ASSISTANT <input checked="" type="checkbox"/>
SECTION VI SKILLS					
1. TYPING (WPM) & SHORTHAND (WPM)		3. INDICATE SHORTHAND SYSTEM USED--CHECK THE APPROPRIATE ITEM			
		<input type="checkbox"/> GREC	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENOTYPE	<input type="checkbox"/> OTHER SPECIFIC
SECTION VII SPECIAL QUALIFICATIONS					
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED					
Extremely dependable in First Aid (advanced) and teaching of same. Firefighting procedures. Elementary knowledge of Real Estate Procedures.					
SECTION VIII MILITARY SERVICE					
CURRENT DRAFT STATUS					
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?	2. NEW CLASSIFICATION				
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	N/A				
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS	4. IF DEFERRED, GIVE REASON				
N/A	N/A				
MILITARY RESERVE, NATIONAL GUARD STATUS					
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG	<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD	<input type="checkbox"/> AIR NATIONAL GUARD
NONE					
5. CURRENT RANK, GRADE OR RATE	6. DATE OF APPOINTMENT IN CURRENT RANK	7. EXPIRATION DATE OF CURRENT OBLIGATION			
N/A	N/A	N/A			
8. CHECK CURRENT RESERVE CATEGORY					
<input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (ARMED) <input type="checkbox"/> STANDBY (ARMED) <input type="checkbox"/> RETIRED <input checked="" type="checkbox"/> DISCHARGED					
9. MILITARY MOBILIZATION ASSIGNMENT	10. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED				
N/A					
MILITARY SCHOOLS COMPLETED (Excluded Active, Reserve Duty, or as Civilian)					
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	DATE COMPLETED	RESIDENT AGENCY SPONSORED		
Non-COM leadership school	SAME	?????			
SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS					
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)			DATE OF MEMBERSHIP	
American Red Cross Rockville Fire Dept and OTHERS	Silver Spring Md (presently Rockville, Md)			1964	present
International Rescue & 1st Aid Assoc	worldwide			1958	present
Montgomery Board of Realtors (ASSOCIATE member)(Permanency Pending)				1956(7)	present
				1958	present
SECTION X REFERENCES					
I am a bit hazy on the dates.					
DATE 19 Dec 68	SIGNATURE OF EMPLOYEE <i>Robert H. H.</i>				

SECRET

SECRET

XEROX REPRODUCED BY

SECTION V - GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY - CHECK ER			
				RESIDENCE	TRAVEL	STUDY	WORK ACTIVITY
Cuba	Area and people/Lan.	1919-1924	Family	X		X	X
Panama	Area and people/Lan	1952-58	RELOC	X	X	X	X
Dom Rep	Area and People/Lan	1965			X		X
Salvador/Guat		1961-2-3			X		X
SECTION VI & Mex							
TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (FPM)	2. SHORTHAND (BFW)	3. INDICATE SHORTHAND SYSTEM USED - CHECK ER APPROPRIATE ITEM					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> BRIGG	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENOTYPE	<input type="checkbox"/> OTHER SPECIFY:		
SECTION VII - SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON Hobbies, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED							
Quite proficient in photography - Safety and Fire engineering - First Aid including the Instruction of First Aid & Hospital Corpman duties. SOME Real Estate knowledge.							
SECTION VIII - MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?		2. NEW CLASSIFICATION					
<input type="checkbox"/> YES	<input type="checkbox"/> NO	See age					
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4. IF DEFERRED, GIVE REASON			
MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG		<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD		
		<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE	<input type="checkbox"/>	<input type="checkbox"/> AIR NATIONAL GUARD		
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK		3. EXPIRATION DATE OF CURRENT OBLIGATION			
N/A		N/A		N/A			
4. CHECK CURRENT RESERVE CATEGORY		<input type="checkbox"/> READY RESERVE	<input type="checkbox"/> STANDBY(ARMED)	<input type="checkbox"/> STANDBY(MOBILE)	<input type="checkbox"/> RETIRED	<input checked="" type="checkbox"/> DISCHARGED	
5. MILITARY MOBILIZATION ASSIGNMENT		6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED					
N/A		N/A					
MILITARY SCHOOLS COMPLETED (Excluded Active, Reserve Duty, or Civilian)							
NAME AND ADDRESS OF SCHOOL		STUDY-ON SPECIALIZATION		DATE COMPLETED		REMARKS	
Non-Com leadership school		Infantry		1943		RE N/A GEN N/A SPONSORED	
SECTION IX - PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)				DATE OF MEMBERSHIP	
Rockville Fire Dept & others		Rockville Md & others				FROM TO	
1. Red Cross as Emergency transport and						1958 present	
2. First-Aid-Instructor as well as Md-Corpman						1964	
Associate member Mont Realtors						1968	
Int Assoc Rescu & First Aid						1964	
SECTION X - REMARKS							
Re Section IV: Both daughters now married.							
Re Section III: This is second marriage.							
Re Real Estate training: This still in active stage. Plans are to supplement my work and eventually change to it on full time basis.							
DATE	SIGNATURE OF EMPLOYEE						
25 Nov 68	W. J. D. S.						

SECRET

SECRET

(Type or Print)

## QUALIFICATIONS UPDATE

## READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS.

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room SE-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

## SECTION I

## BIOGRAPHIC AND POSITION DATA

EMP. SER. NO.	NAME (Last-First-Middle)	DATE OF BIRTH
027630	Hidalgo, Balme N.	05/27/19

## SECTION II

## EDUCATION

## HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State Country)	YEARS ATTENDED (From-To)	GRADUATE
La Salle Academy	NYC NY	1938-40	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

## COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM - TO -	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/QUARTER HRS. (Specify)
	MAJOR	MINOR				
1. New York University	Comm Law Import-Export procedures		1943/45	NO		
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

## TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
University of Md. College of Engineering	Fire Service extension	Jan 66	Aug 66	8

## OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
Montgomery Junior College Rockville, Md. Campus	Real Estate procedures	Oct 1968		1
Suburban Hospital Bethesda, Md	Emergency Medical Aid/ Maryland State Corpman	Jan-May 1968		5

## SECTION III

## MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY: Married

2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)  
HIDALGO Veronica W. (WAYLONES)

3. DATE OF BIRTH May 29 1914 4. PLACE OF BIRTH (City, State Country) DuBois, Pa., USA

5. OCCUPATION Admin Asst 6. PRESENT EMPLOYER C.I.A.

7. CITIZENSHIP US 8. FORMER CITIZENSHIP(S) COUNTRY(IES) N/A 9. DATE U.S. CITIZENSHIP ACQUIRED Birth

## SECTION IV

## DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	NYC NY - Feb 23/50	US	Alexandria Va
2. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	NYC NY - Jan 6/45	US	Arlington Va

ALSO FIRST AID INSTRUCTORS Course of one 10-44 form.

SECRET

When Filled In

LLC

OFFICIAL USE ONLY (Until 1200 hrs)

## QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING TYPE OR PRINT AVOID USING EIGHT COLORED INKS

SECTION I		BIOGRAPHIC AND POSITION DATA		
1 EMP SEE NO 027030	2 NAME (Last First Middle) MICALGO B N JR	3 SEX M	4 DATE OF BIRTH 09/27/19	5 SCHEDULE GRADE/STEP GS - 22-04
6 SD	7 POSITION TITLE CPS OFFICER	8 OFFICE OF ASSIGNMENT WH	9 LOCATION (Country City) WASH., D.C.	

SECTION II		AGENCY OVERSEAS SERVICE		
AREA	TYPE TOUR	FROM	TO	
WESTERN HEMISPHERE	PCS-YY	92/05/12	97/12/30	
WESTERN HEMISPHERE	TDY-CC	99/01/29	99/02/08	
WESTERN HEMISPHERE	TDY-CC	01/02/01	01/03/01	
WESTERN HEMISPHERE	TDY-CC	01/04/19	01/06/19	
EUROPEAN AREA	TDY-CC	03/12/01	03/12/18	
WESTERN HEMISPHERE	PCS-CC	09/04/01	AB/09/01	
WESTERN HEMISPHERE	TDY-CC	03/04/01	04/04/01	
WESTERN HEMISPHERE	TDY-CC	05/17/01	06/24/01	
		THIS WEEKS		

## OVERSEAS DATA

CODED 25 APR 1968

DATE: INITIALS: 11

SECTION III		EDUCATION		
DEGREE	MAJOR FIELD	COLLEGE	YEAR	
NO COLLEGE DEGREE ON RECORD				
NONE	Two years - Commercial type IMPERIAL ENGLAND, BIRMINGHAM	NYU	1943-44	

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SECTION II		EDUCATION (Cont'd)					
		HIGH SCHOOL					
LAST HIGH SCHOOL ATTENDED Lé Salle Academy		ADDRESS OF STATE COUNTY NYC NY		YEARS ATTENDED FROM TO 1938-40		GRADUATE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE OR UNIVERSITY STUDY							
NAME AND LOCATION OF COLLEGE OR UNIVERSITY NYU - NYC NY		SUBJECT		YEARS ATTENDED FROM TO		DEGREE RECEIVED	YEAR RECEIVED
		MAJOR Commerce	MINOR LAW	Sept 43 to ? 45		No	777
3. IF A GRADUATE COURSE HAS BEEN NOTED ABOVE, INDICATE SUBJECT, DATE OF WRITTEN THESIS AND GIVE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT ONEB2E42 DUNN							
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1.							
2.							
3.							
4.							
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1.							
2.							
3.							
4.							
AGENCY SPONSORED EDUCATION							
Specify which, if any, of the education shown in Section II was Agency sponsored							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1. Full Ops course				During 1958		9	
2. Management Course				1966 One week			
3.							
4.							
5.							

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SECTION VII		MILITARY SERVICE									
CURRENT DRAFT STATUS											
1. ARE YOU REGISTERED FOR THE DRAFT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		2. SELECTIVE SERVICE CLASSIFICATION ???									
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS N/A		4. IF DEFERRED, GIVE REASON N/A									
MILITARY SERVICE RECORD (Active Duty Only)											
1. MILITARY ORGANIZATION (Army, Navy, etc.) <b>Army</b>		2. BRANCH OF SERVICE <b>Infantry</b>	3. DATES OF SERVICE (extend entire duty) From <b>Oct 1940</b> To <b>Sept 1943</b>								
4. STATUS (Regular Reserve or National Guard) <b>Federalized National Guard</b>		5. RANK GRADE OR RATE OF SEPARATION, IF NOT ACTIVE <b>Cpl.</b>	6. SERIAL SERVICE OR FILE NUMBER <b>20249766</b>								
7. CHECK TYPE OF SEPARATION <input checked="" type="checkbox"/> HONORABLE DISCHARGE <input type="checkbox"/> RELEASE TO INACTIVE DUTY <input type="checkbox"/> RETIREMENT FOR AGE <input type="checkbox"/> RETIREMENT FOR PHYSICAL DISABILITY <input type="checkbox"/> RETIREMENT FOR COMBAT DISABILITY <input type="checkbox"/> UNDUE HARSHIPS <input type="checkbox"/> OTHER (Specify)											
8. BRIEF DESCRIPTION OF MILITARY DUTIES (Indicate the duties and tasks which best describe your work or function in the military service)  <b>Infantryman; Cryptographic section; driver.</b>											
MILITARY RESERVE/NATIONAL GUARD STATUS											
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG <b>NoGs</b> <table style="margin-left: auto; margin-right: auto;"> <tr> <td><input type="checkbox"/> ARMY</td> <td><input type="checkbox"/> MARINE CORPS</td> <td><input type="checkbox"/> COAST GUARD</td> <td><input type="checkbox"/> NATIONAL GUARD</td> </tr> <tr> <td><input type="checkbox"/> NAVY</td> <td><input type="checkbox"/> AIR FORCE</td> <td><input type="checkbox"/> AIR NATIONAL GUARD</td> <td></td> </tr> </table>				<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD	<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE	<input type="checkbox"/> AIR NATIONAL GUARD	
<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD								
<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE	<input type="checkbox"/> AIR NATIONAL GUARD									
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK									
		3. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION									
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY - ACTIVE <input type="checkbox"/> STANDBY - INACTIVE <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED											
5. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES (Indicate the duties and tasks which best describe your work or function in the military service)											
6. IF YOU ARE CURRENTLY ASSIGNED TO A RESERVE OR NATIONAL GUARD TRAINING UNIT, IDENTIFY THE UNIT AND ITS ADDRESS											
MILITARY SCHOOLS COMPLETED (Active Duty, Reserve Status or as Civilian)											
NAME AND ADDRESS OF SCHOOL		FIELD OF SPECIALIZATION	DATE COMPLETED								
1.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED								
2.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED								
3.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED								
4.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED								
5.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED								

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**SECRET**

(When filled in)

SECTION IV - GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL						
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATE OF TRAVEL OR REVENUE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY: CHECK (X)		
				RES- DENCE	TRAVEL	STUDY
Cuba	Language Area Knowledge	1919-1924	—	X		
Panama	" " "	1952-58		X		X
Puerto Rico	" " "	various		X		X
Guatemala	" " "	various		X		X
El Salvador	" " "	various		X		X
Mexico	" " "	various		X		X
Dom Rep	" Limited area knowledge	1965				X
Germany	" " "	1963				X
Scotland	" " "	1963				X

SECTION V - TYPING AND STENOGRAPHIC SKILLS					
1. TYPING (WPM)	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM			
40		<input type="checkbox"/> GREGG	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENOTYPE	<input type="checkbox"/> OTHER SPECIES
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (COMPUTER, TELETYPE, TELETYPE CARD PUNCH, ETC.)					
Various					

SECTION VI - SPECIAL QUALIFICATIONS					
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED INDICATE YOUR PROFICIENCY IN EACH					
First Aid Instructor. Very active currently.					
Fire Fighting and safety practices. University of Maryland. Active currently.					
Sky Diving - 10 jumps during 1962. Done once.					
2. LISTING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4. SPECIFICALLY LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS, TELETYPE, SPEED READING & RECORDING, OFFSET PRESS, TURRET LATHE, ETC. AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES					
3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PHOT., ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC?					
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					
4. IF YOU HAVE ANSWERED 'YES' TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license number if known)					
First Aid Instructor - National Red Cross - 1963      5. FIRST LICENSE/CERTIFICATE (Year of issue) 1963					
6. LATEST LICENSE/CERTIFICATE (Year of issue)					
7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR. DO NOT SUBMIT COPIES UNLESS REQUESTED. INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Fiction or scientific articles, general interest, scholarly, novels, short stories, etc.)					
8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED					
9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE					

**SECRET**

SECRET

When filled in

SECTION IX		MARITAL STATUS			
1 PRESENT STATUS (Single, Married, Separated, Divorced, Widowed)		SPECIES		MARRIED	
2 NAME OF SPOUSE		Veronica		WATLONES	
3 DATE OF BIRTH		4 PLACE OF BIRTH (City, State, Country)			
May 23 1914		Dubots, Pa., USA.			
5 OCCUPATION		6 PRESENT EMPLOYER			
Administrative Asst		CIA			
7 CITIZENSHIP		8 FORMER CITIZENSHIP/COUNTRY(IES)		9 DATE U.S. CITIZENSHIP ACQUIRED	
US		None		N/A	
SECTION X DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE					
NAME		RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
Frances R. Hidalgo		daughter	Feb 23 1950 NYC NY US		Alexandria, Va
Balmer N. Hidalgo Sr.		father	Dec 15 1898 Puerto Rico	US	NYC NY
Rosa Hidalgo		mother	Jan 12 1892 Spain	US	NYC NY
<p> </p>					
SECTION XI PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS					
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, County)			DATE OF MEMBERSHIP
					FROM TO
American Red Cross		Montgomery Cty, Md.			1964 present
Civil Defense team					
Franconia Volunteer Fire Department		Franconia, Va			1958 1963
Rockville Volunteer Fire Department		Rockville, Md.			1964 present
International Rescue and First Aid Association					1967 present
DATE		SIGNATURE OF EMPLOYEE			
9 Feb 1968		<i>S. A. H.</i>			

**SECRET**

## SECRET

(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA					2. L.D.NO.											
3. NAME (7-24)		4. COMPONENT		5. GRADE		6. DATE OF BIRTH												
7. LANGUAGE		8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (26-33)												
11. TEST PURPOSE		TEST SCORES				13. ELIGIBILITY (39)												
AWARD	READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE	NOT AWARDABLE											
SKILL						A	M											
14. I CERTIFY THIS EMPLOYEE FOR AWARD		15. TYPE OF AWARD																
SIGNATURE		<table border="1"> <tr> <td>A-M</td> <td>E-I-N</td> <td>C</td> <td>R-W-S</td> <td>D-V</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>							A-M	E-I-N	C	R-W-S	D-V					
A-M	E-I-N	C	R-W-S	D-V														
16. AMOUNT OF AWARD		17. I CERTIFY THAT FUNDS ARE AVAILABLE OBLIGATION REF. NO. SIGNATURE																
\$																		
18. FEDERAL TAX DEDUCTION		19. STATE/DC TAX DEDUCTION																
\$		\$																
21. NET AMOUNT OF AWARD		22. EMPLOYEE PAYROLL NO.																
\$																		
23. FORWARD CHECK TO		24. ALLOTMENT OF ASSIGNMENT																
25. CHECK NO.		DATE																

FORM 4-58 1273 USE PREVIOUS EDITIONS

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(10-49) MRD COPY

## SECRET

(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA					2. L.D.NO.											
3. NAME (7-24)		4. COMPONENT		5. GRADE		6. DATE OF BIRTH												
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AWARD	READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE	NOT AWARDABLE											
SKILL						A	M											
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A-M	E-I-N	C	R-W-S	D-V														
16. AMOUNT OF AWARD		17. I CERTIFY THAT FUNDS ARE AVAILABLE OBLIGATION REF. NO. SIGNATURE																
\$																		
18. FEDERAL TAX DEDUCTION		19. STATE/DC TAX DEDUCTION																
\$		\$																
21. NET AMOUNT OF AWARD		22. EMPLOYEE PAYROLL NO.																
\$																		
23. FORWARD CHECK TO		24. ALLOTMENT OF ASSIGNMENT																
25. CHECK NO.		DATE																

FORM 4-58 1273 USE PREVIOUS EDITIONS

SECRET

(10-49) MRD COPY

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(When Filled In)

127-630	LANGUAGE DATA RECORD		
PART I-GENERAL			
1. NAME (Last-First-Middle) (17-241)	2. DATE OF BIRTH (129-301)		
Hidalgo, Balmes Nieves JR	MONTH	DAY	YEAR
May	27	1910	
3. LANGUAGE (181-331)	4. TODAY'S DATE (134-331)	5.	
Spanish	May	9	1958
<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE			
PART II-LANGUAGE ELEMENTS			
SECTION A. Reading (40)			
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.			
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (NEWSPAPERS, REFERENCE MATERIALS, ETC.), USING THE DICTIONARY FREQUENTLY.			
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.			
5. I HAVE NO READING ABILITY IN THE LANGUAGE.			
SECTION B. Writing (41)			
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.			
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.			
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.			
5. I CANNOT WRITE IN THE LANGUAGE.			
SECTION C. Pronunciation (42)			
1. MY PRONUNCIATION IS NATIVE.			
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.			
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.			
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.			
5. I HAVE NO SKILL IN PRONUNCIATION.			
CONTINUE ON REVERSE SIDE			

## CONTINUATION OF PART II-LANGUAGE ELEMENTS

## SECTION D. Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL, AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

## SECTION E. Understanding (14)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND PUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

## PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (48)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

## PART IV-CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 23-115, PAR. IC(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED	SIGNATURE
9 May 1958	<i>Herman H. Helberg</i>
(46)	C
(47)	A

SECRET

(When Filled In)

11-81 127630	LANGUAGE DATA RECORD		
PART I-GENERAL			
1. NAME (Last-First-Middle) (17-24)		2. DATE OF BIRTH (25-30)	
Hidalgo, Balme Nieves JR		MONTH	DAY
May 27		YEAR	1959
3. LANGUAGE (31-33)	4. TODAY'S DATE (34-39)	5.	
Portuguese 6.30	May 9 1958	<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS			
SECTION A. Reading (40)			
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.			
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.			
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.			
5. I HAVE NO READING ABILITY IN THE LANGUAGE.			
SECTION B. Writing (41)			
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.			
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.			
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE; USING THE DICTIONARY FREQUENTLY.			
5. I CANNOT WRITE IN THE LANGUAGE.			
SECTION C. Pronunciation (42)			
1. MY PRONUNCIATION IS NATIVE.			
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.			
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.			
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.			
5. I HAVE NO SKILL IN PRONUNCIATION.			
CONTINUE ON REVERSE SIDE			

## CONTINUATION OF PART III-LANGUAGE ELEMENTS

## SECTION D.

## Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

## SECTION E.

## Understanding (44)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND PUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

## PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

## PART IV-CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR. 1C(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT INRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED	SIGNATURE
9-May-1958	<i>Solan, B. Toliver</i>
1461	1473

CONFIDENTIAL

SECURITY APPROVAL

DATE : 17 April 1964

YOUR  
REFERENCE: 18658 DDP/SAS

CASE NO. : 65077

TO : Director of Personnel

ATTN :

SUBJECT : HIDALGO, Balme Nieves, Jr.

1. This is to inform you that Subject has been approved for the appointment specified in your request under the provisions of Headquarters Regulations 10-3 and 20-5 including access to classified information through TOP SECRET as required in the performance of duties.
2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.
3. As part of the entrance on duty processing:

A personal interview in the Office of Security must be arranged.

A personal interview is not necessary.

Please advise Chief, Clearance Branch, extension 5620 when Subject enters on duty.

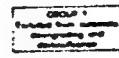
4. This is a conversion case.

FOR THE DIRECTOR OF SECURITY:

*W. A. Osborne*

W. A. Osborne

Chief, Personnel Security Division



CONFIDENTIAL  
(When Filled In)

## STAFF AGENT CLEARANCE

DATE : 22 April 1963

YOUR REFERENCE: Memorandum of 19 April 1963

CASE NO. : F65077

TO : Chief, Contract Personnel Division

ATTN. : Staff Agents Branch

SUBJECT : [REDACTED] Heddyje &amp; N. J.

1. This is to advise that a security clearance is granted for the employment of the Subject as a Staff Agent, OS-11, by DDP/SAS in the capacity of Operations Officer under Project JMWAVE.

2. If your office should desire at a later date to change the status or use of the Subject, a request to cover any proposed change should be submitted to this office.

3. Unless arrangements are made within 60 days for entrance on duty within 120 days, this Approval becomes invalid.

4. As a part of entrance on duty processing:

A personal interview in the Office of Security must be arranged by your office.

A personal interview is not necessary.

W. A. Osborne

W. A. Osborne

CHIEF, PERSONNEL SECURITY APPROVALS US

JMA

**CONFIDENTIAL**  
(WHEN FILLED IN)

**SECURITY APPROVAL**

**DATE :** 10 March 1958

**YOUR  
REFERENCE:**

**CASE NO. :** 65077

**TO :** Director of Personnel  
**FROM :** Director of Security  
**SUBJECT :** HIDALGO, Balmes Nieves

1. This is to inform you of security approval of the subject person as follows:

- Subject has been approved for the appointment specified in your request under the provisions of Regulations 10-210 and 20-730 including access to classified information through Top Secret as required in the performance of his duties.
- Subject has been approved for appointment under the authority of Paragraph 4(d) of Regulation 10-210, and under Regulation 20-730 including access to classified information through Top Secret as required in the performance of his duties.

2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.

3. As part of the entrance on duty processing:

- A personal interview in the Office of Security must be arranged.
- A personal interview is not necessary.
- This clearance is issued in advance of receipt of a SF-377. Subject will be assigned to the WH Division.

FOR THE DIRECTOR OF SECURITY:

*W. M. Knott*  
W. M. Knott  
Chief, Personnel Security Division

~~SECRET~~

## BIOGRAPHIC INFORMATION

Name: Palme N. HIDALGO, Jr.  
Grade: GS-11  
Service Designation: DI

Date and Place of Birth: 27 May 1919  
Havana, Cuba

Marital Status: Married

Education and Career Outside the Agency: 1945-46 New York University - No degree (2 yrs)  
Nov 46-Dec 49 FBI, Eastern part of United States -  
Undercover Agent

Languages: Spanish - Fluent  
Portuguese & French - Fair

Military Duty: 27 Mar 39-27 Sep 1943 New York National Guard  
(Federalized Oct 40) U.S. Army

CIA Experience: 18 Feb 52 Ex Appt., Contract Employee, GS-9, DDP/H/  
HYPOTHESIS,  
1 Feb 56 Promotion, Contract Employee, GS-11, DDP/H,  
HYPOTHESIS,

CIA Training: Covert training

CONFIDENTIAL  
(When Packed In)

INSTRUCTIONS - COMPLETED IN DUPLICATE. THE DATA RECORDED ON THIS FORM IS ESSENTIAL IN DETERMINING TRAVEL EXPENSES ALLEGED IN CONNECTION WITH LEAVE AT GOVERNMENT EXPENSE, OVERSEAS DUTY, RETURN TO RESIDENCE UPON SEPARATION, AND FOR PROVIDING CURRENT RESIDENCY AND DEPENDENCY INFORMATION REQUIRED IN THE EVENT OF AN EMPLOYEE EMERGENCY. THE ORIGINAL OF THIS FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

NAME OF EMPLOYEE		(Last)	(First)	(Middle)
		HIDALGO JR		
		BALMES	NIEVES	
1. RESIDENCE DATA				
PLACE OF RESIDENCE WHEN APPOINTED		LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)		
D.C.				
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE				
D.C.				
2. MARITAL STATUS				
(Check One) <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED				
If MARRIED, INDICATE PLACE OF MARRIAGE				DATE OF MARRIAGE
BELLZONI MISS. USA				9 APR 1943
If DIVORCED, PLACE OF DIVORCE DECREE				DATE OF DECREE
If WIDOWED, INDICATE PLACE SPOUSE DIED				DATE SPOUSE DIED
If PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)				
3. MEMBERS OF FAMILY				
NAME OF SPOUSE	ADDRESS (No., Street, City, Zone, State)			TELEPHONE NUMBER
LOUISE HIDALGO				
NAME OF CHILDREN	ADDRESS			SEX <input type="checkbox"/> F AGE 13 <input type="checkbox"/> F 9
Luz Maria Frances Rebecca				
NAME OF FATHER (Or male guardian)	ADDRESS			TELEPHONE NUMBER
HIDALGO N HIDALGO				
NAME OF MOTHER (Or female guardian)	ADDRESS			TELEPHONE NUMBER
Rose HIDALGO				
WHAT MEMBER(S) OF YOUR FAMILY HAS BEEN TOLD OF YOUR AFFILIATION WITH THE AGENCY FOR EMERGENCY PURPOSES?				
WIFE				
4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY				
NAME (Mr., Mrs., Miss) (Last-First-Middle)				RELATIONSHIP
HIDALGO, LOUISE				<input type="checkbox"/> Wife
HOME ADDRESS (No., Street, City, Zone, State)				HOME TELEPHONE & EXTENSION
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE				
IS THE INDIVIDUAL NAMED ABOVE NOTIFYING OF YOUR AGENCY AFFILIATION?				
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF?				
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE?				
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				
THE PERSONS NAMED IN ITEM 3 ABOVE MAY ALSO BE NOTIFIED IN CASE OF EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 7 ON THE REVERSE SIDE OF THIS FORM.				
5. VOLUNTARY ENTRIES				
INDICATE ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS				
GREENWICH SAVINGS BANK				
CONTINUED ON REVERSE SIDE				
CURRENT RESIDENCE AND DEPENDENCY REPORT				

CONFIDENTIAL  
FBI/DOJ - Seattle Office

## 5. (CONTINUED)

IN WHOM'S NAME(S) ARE THE ACCOUNTS LISTED?

*SUNES M. HICKENBACH THE LITTLE HOUSE*HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?  YES  NO. IF "YES", WHERE IS DOCUMENT LOCATED?HAVE YOU EXECUTED A POWER OF ATTORNEY?  YES  NO. IF "YES", WHO POSSESSED THE POWER OF ATTORNEY?

## 6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

Do NOT notify other persons in item 3 of  
EMERGENCY. UNLESS wife is NOT AVAILABLE.

SIGNED AT	DATE	SIGNATURE
<i>Edwin G. Thigpen</i>		

CONFIDENTIAL

STANDARD FORM 144  
JANUARY 1952  
U. S. CIVIL SERVICE COMMISSION  
(PNC CHAPTERS LI AND R3)

## STATEMENT OF PRIOR FEDERAL AND MILITARY SERVICE

**IMPORTANT:** The information on this form will be used in determining creditable service for *Leave purposes* and retention credits for *reduction in force*. The employee should complete Part I and the Personnel Office should complete Parts II through IV.

<b>PART I.—EMPLOYEE'S STATEMENT</b>												<b>PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE</b>		
1. NAME (Last, first, middle initial)						2. DATE OF BIRTH						9. RETENTION GROUP		
HIDALGO JR., BALMIS NERVIES						27 MNY 1819						10. CSC STATUS (For permanent employees only)		
3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENTS (Do not include military service).												11. SERVICE		
NAME AND LOCATION OF AGENCY			FROM— YEAR MONTH DAY			TO— YEAR MONTH DAY			TYPE OF APPOINTMENT IF KNOWN			YEAR MONTH DAY		
US ARMY DEPT OF Defense QUARTERMASTER COR			51 1 12			Recent to						7 2 6		
4. LIST PERIODS OF SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO MILITARY SERVICE, WRITE "NONE."												12. TOTAL SERVICE		
BRANCH			FROM— YEAR MONTH DAY			TO— YEAR MONTH DAY			DISCHARGE (Hon. or dishon.)			11 8 1		
U.S ARMY INF			1935 MAR 27 43			SEP 21			HONORABLE			4 5 25		
5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If answer is "YES," list following information.)												13. NONCREDITABLE SERVICE (Leave purposes only)		
TYPE IF KNOWN (LWOP, Furl, Susp, AWOL, Mer Mar)			FROM— YEAR MONTH DAY			TO— YEAR MONTH DAY			TOTAL YEARS MONTHS DAYS			14. NONCREDITABLE SERVICE (RIF purposes only)		
6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)												15. REEMPLOYMENT RIGHTS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
7. ARE YOU: A. THE WIFE OF A DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO C. THE UNMARRIED WIDOW OF A VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												16. RETENTION RIGHTS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS. I swear (or affirm) that the above statements are true to the best of my knowledge and belief.												17. EXPIRATION DATE OF RETENTION RIGHTS		
_____ (DATE) Subscribed and sworn to before me on this 13th day of Mar 1958 at Washington, D.C. (MONTH) (CITY) (STATE)												_____ (SIGNATURE) Betty A. Bussard		
S E A L												_____ (OVER)		
NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.												FD-5490-4		

**PART III.—DETERMINING CREDITABLE SERVICE  
AND SERVICE COMPUTATION DATE FOR  
LEAVE PURPOSES**

TOTAL SERVICE (Item 12) .....

NONCREDITABLE SERVICE (Item 13) .....

CREDITABLE SERVICE (Leave purposes) .....

ENTRANCE ON DUTY DATE (Present agency) .....

LESS CREDITABLE SERVICE (Leave purposes) .....

SERVICE COMPUTATION DATE (Leave purposes) .....

YEARS	MONTHS	DAYS

58	3	17
11	8	1
46	7	16

**PART IV.—DETERMINING CREDITABLE SERVICE  
AND SERVICE COMPUTATION DATE FOR  
REDUCTION IN FORCE PURPOSES**

(To be completed only in those cases when the amount of creditable service for reduction in force purposes differs from the amount creditable for leave purposes)

TOTAL SERVICE (Item 12) .....

NONCREDITABLE SERVICE (Item 14) .....

CREDITABLE SERVICE (RIF purposes) .....

ENTRANCE ON DUTY DATE (Present agency) .....

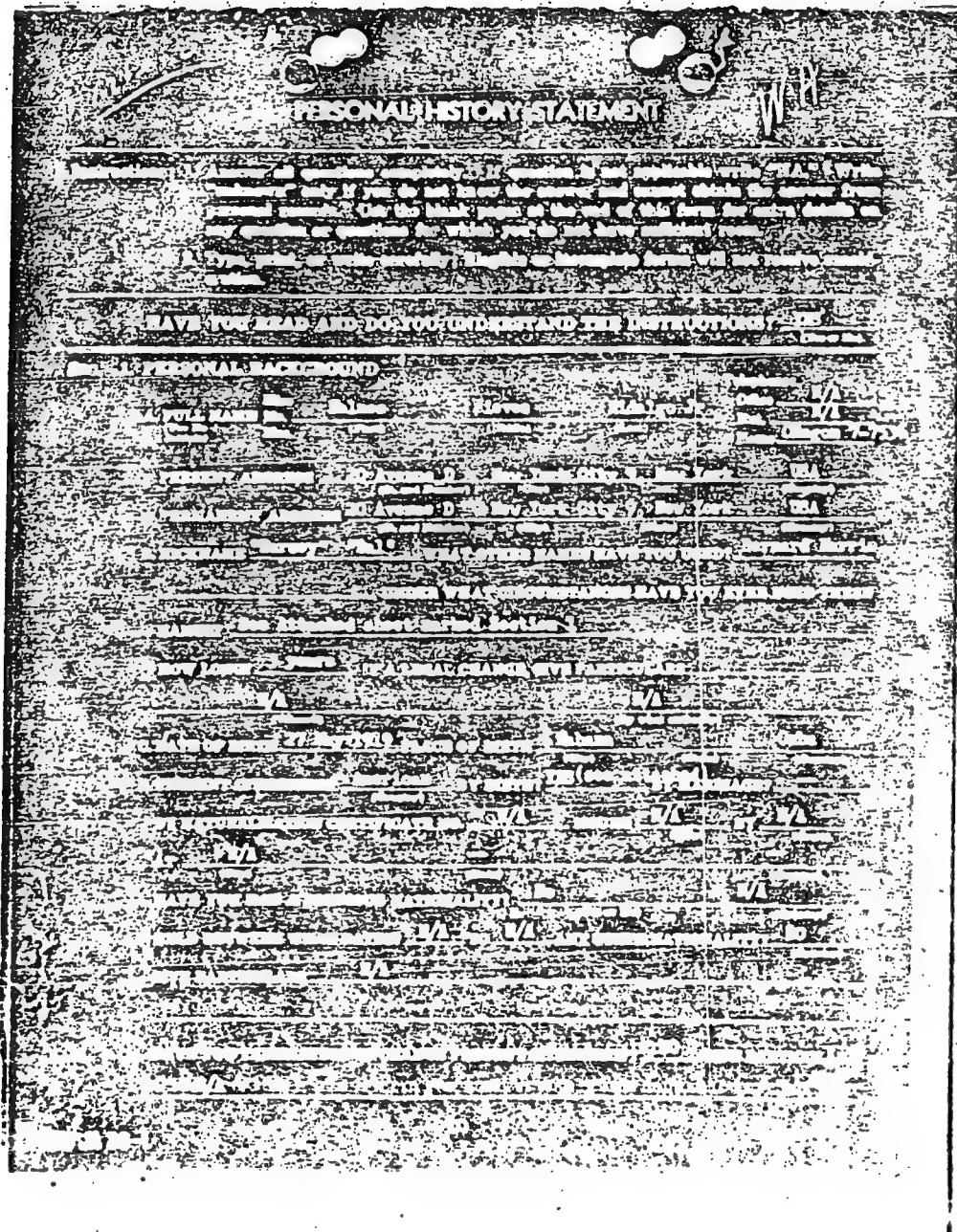
LESS CREDITABLE SERVICE (RIF purposes) .....

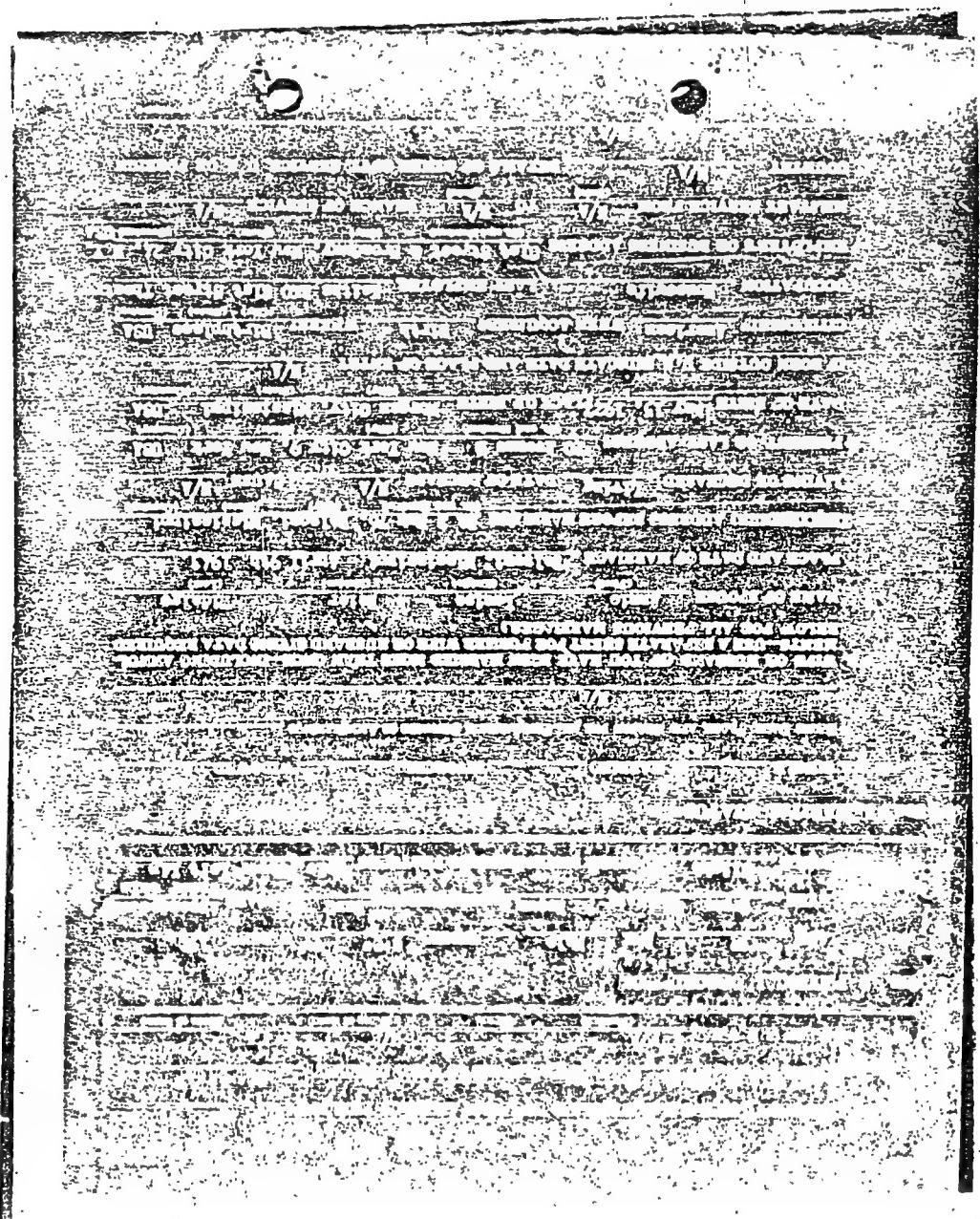
SERVICE COMPUTATION DATE (RIF purposes) .....

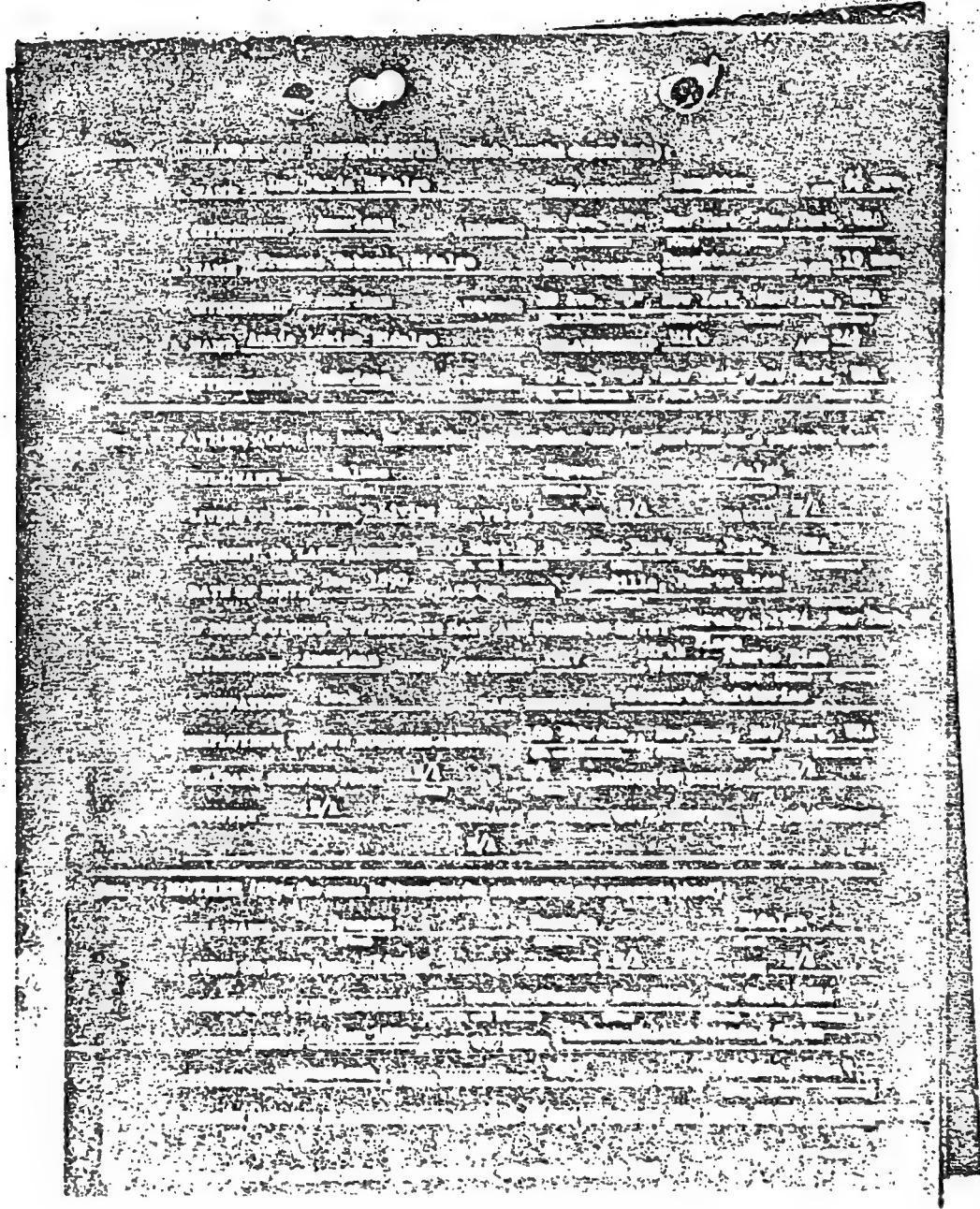
YEARS	MONTHS	DAYS

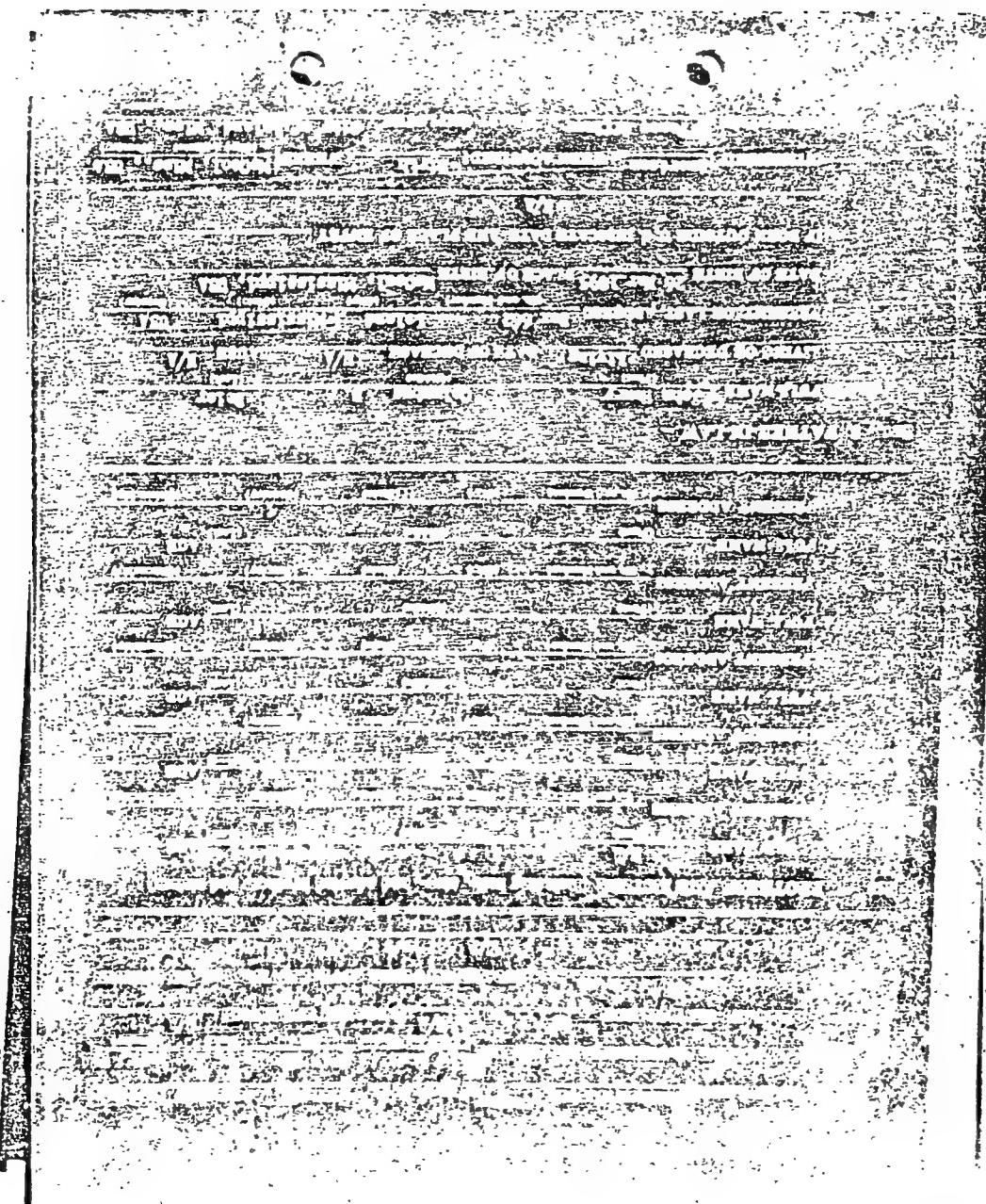

(Enter as the "service computation date" on the employee's "Service Record Card," "SP-7")

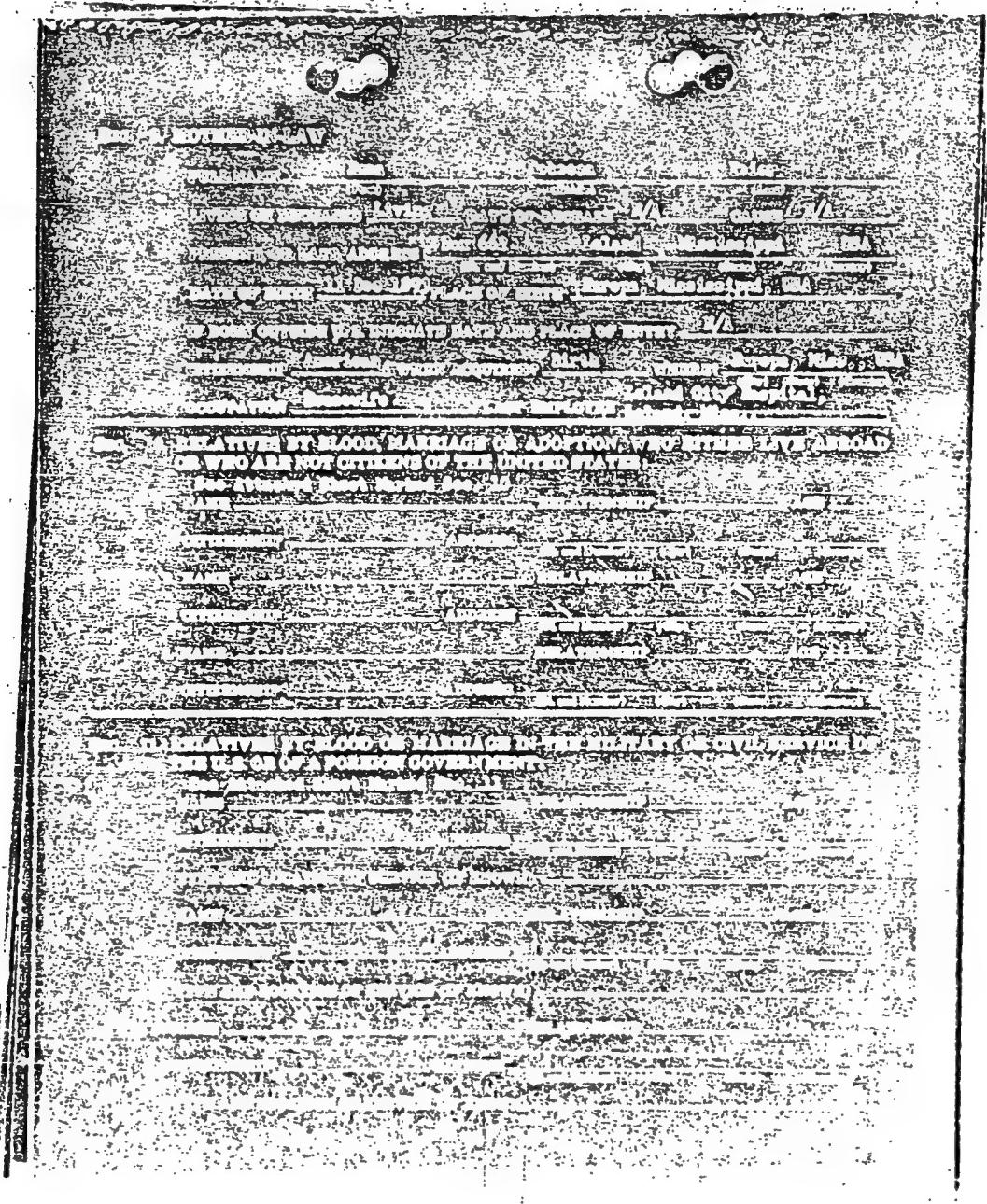
REMARKS:

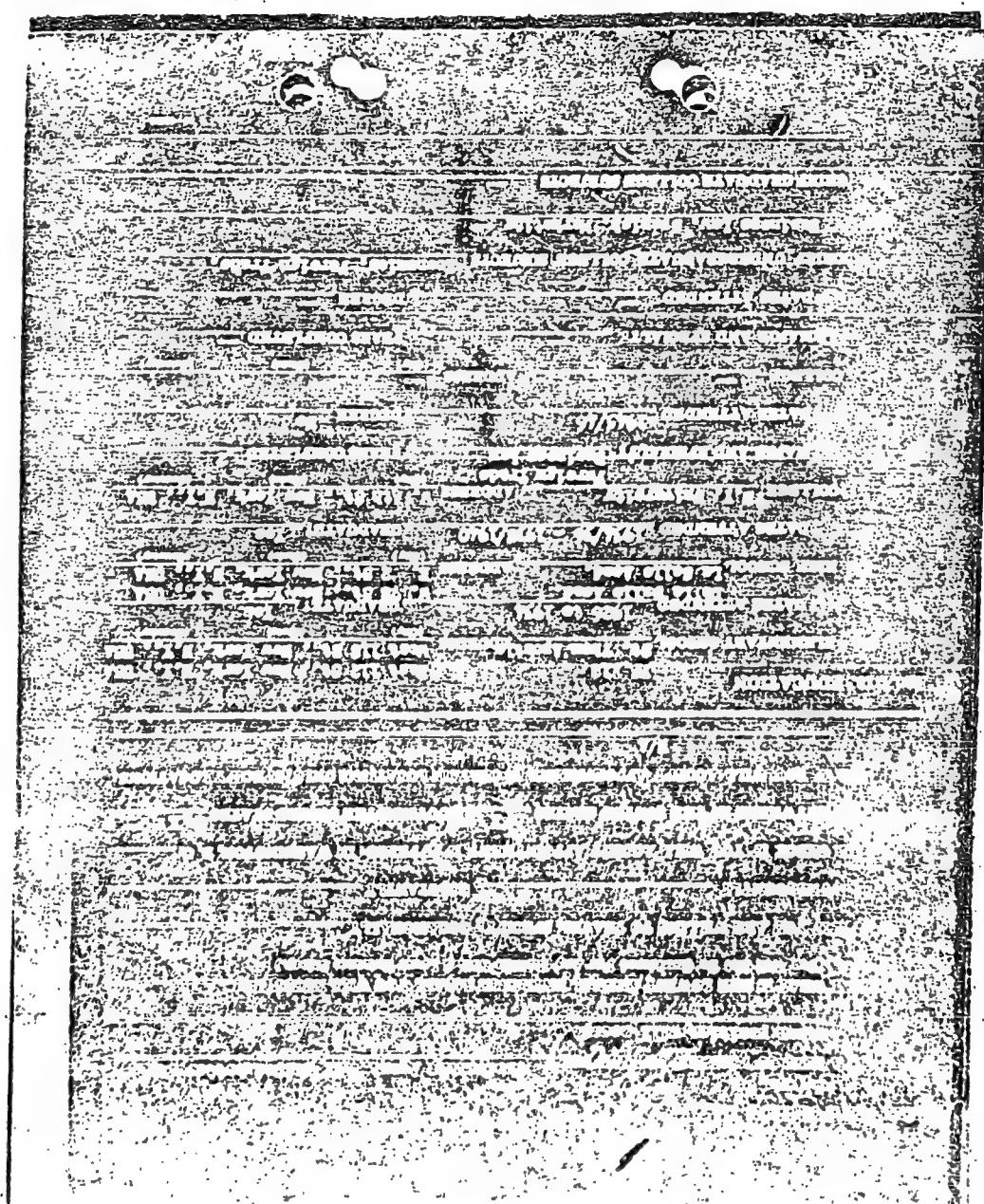




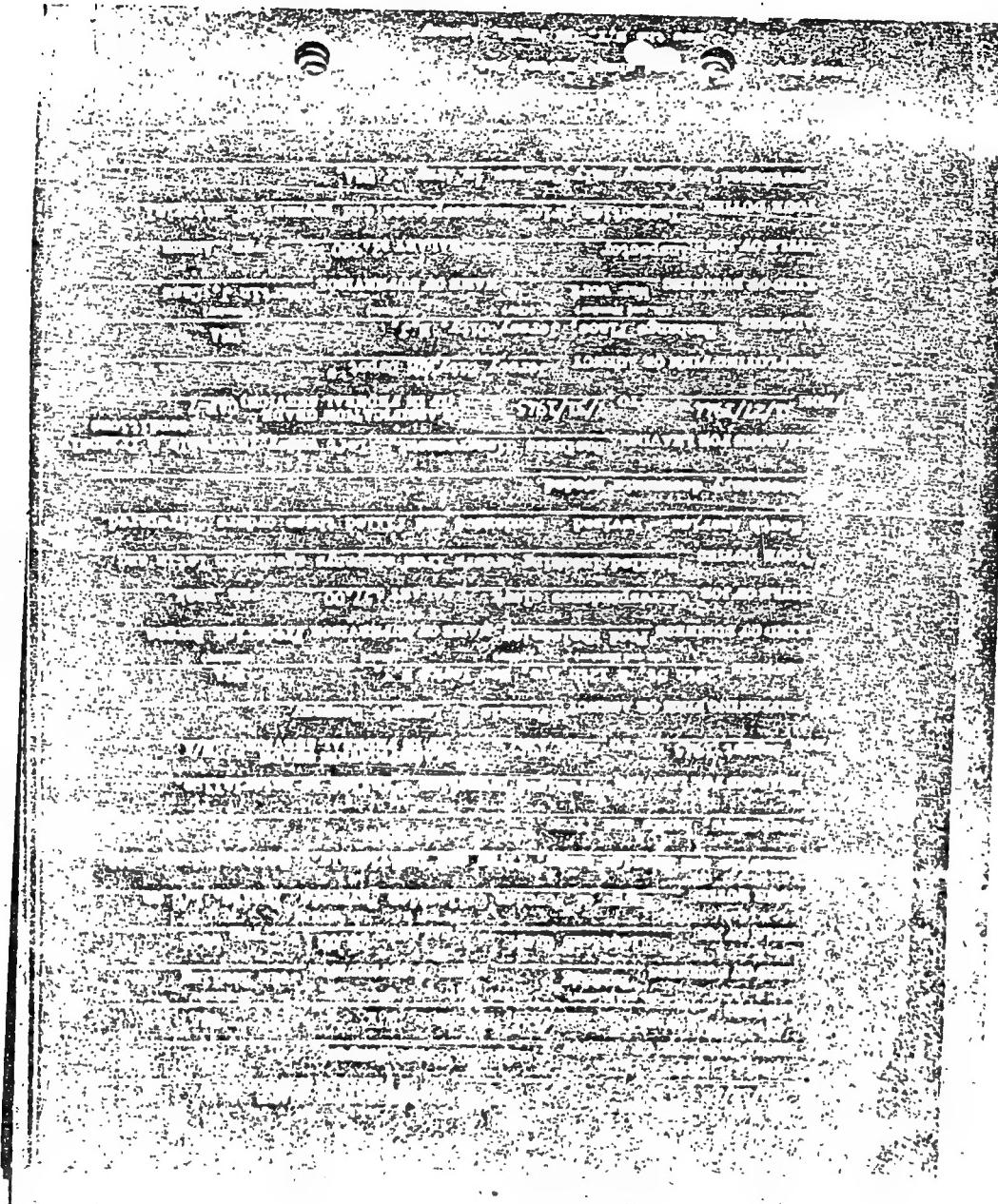


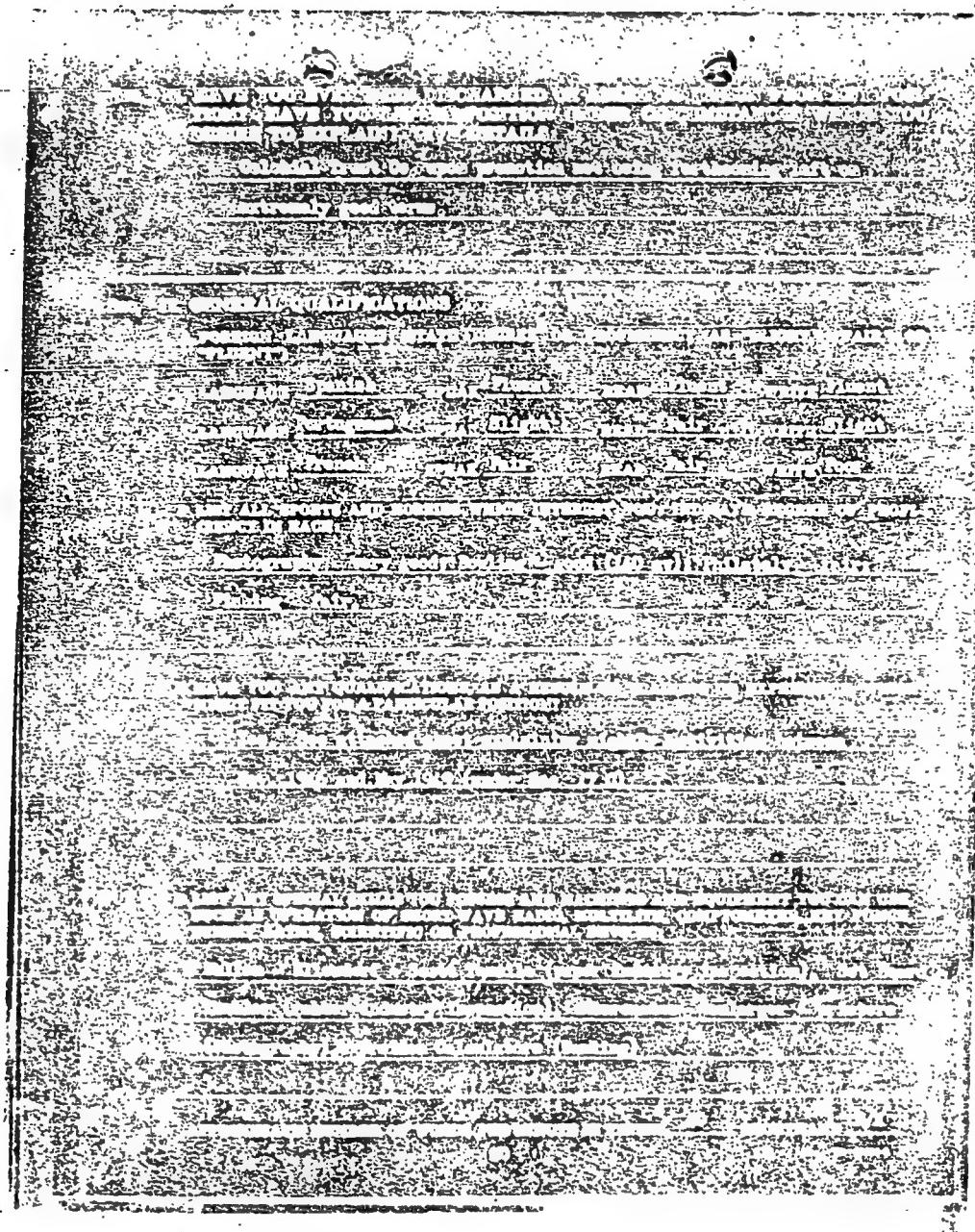


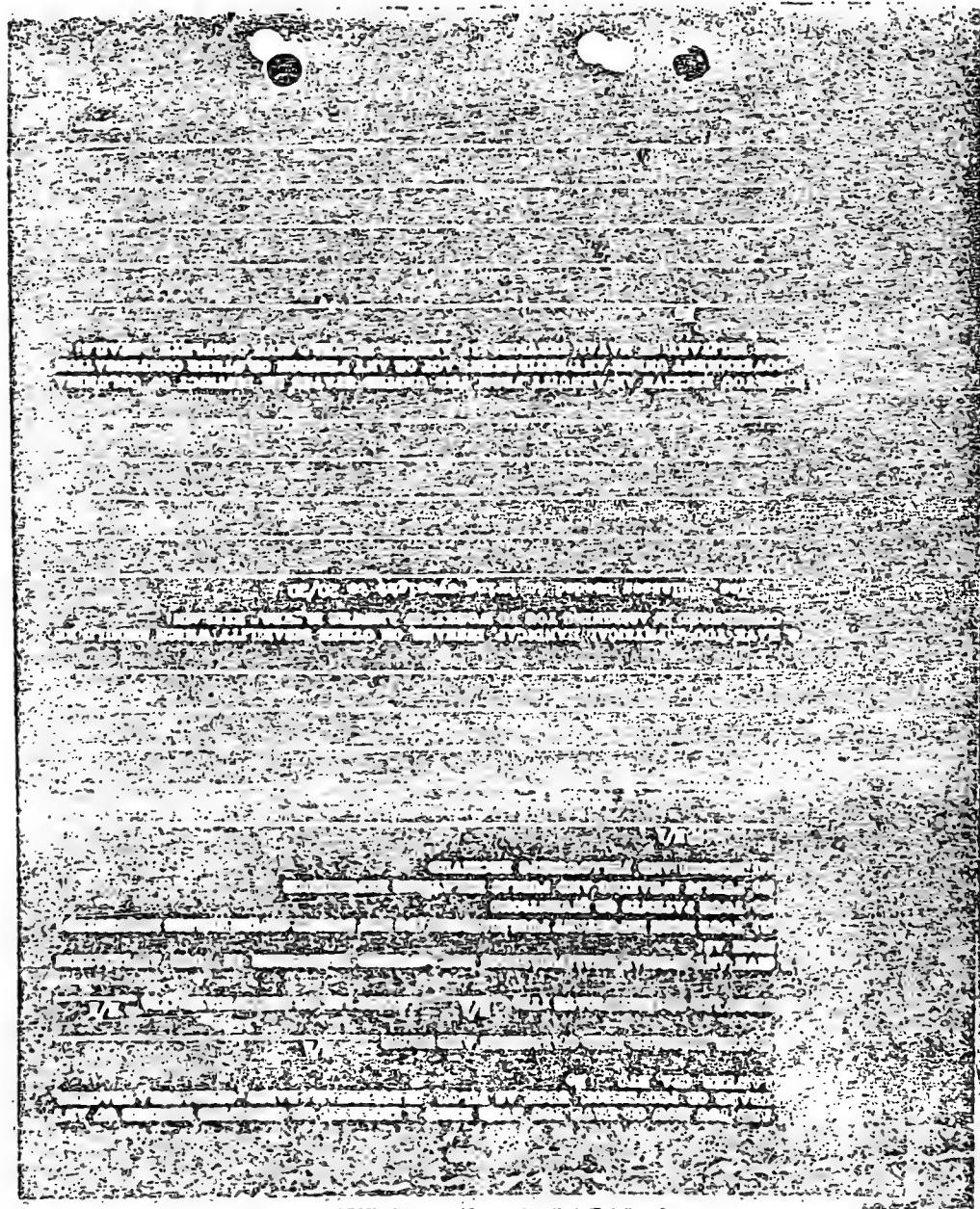


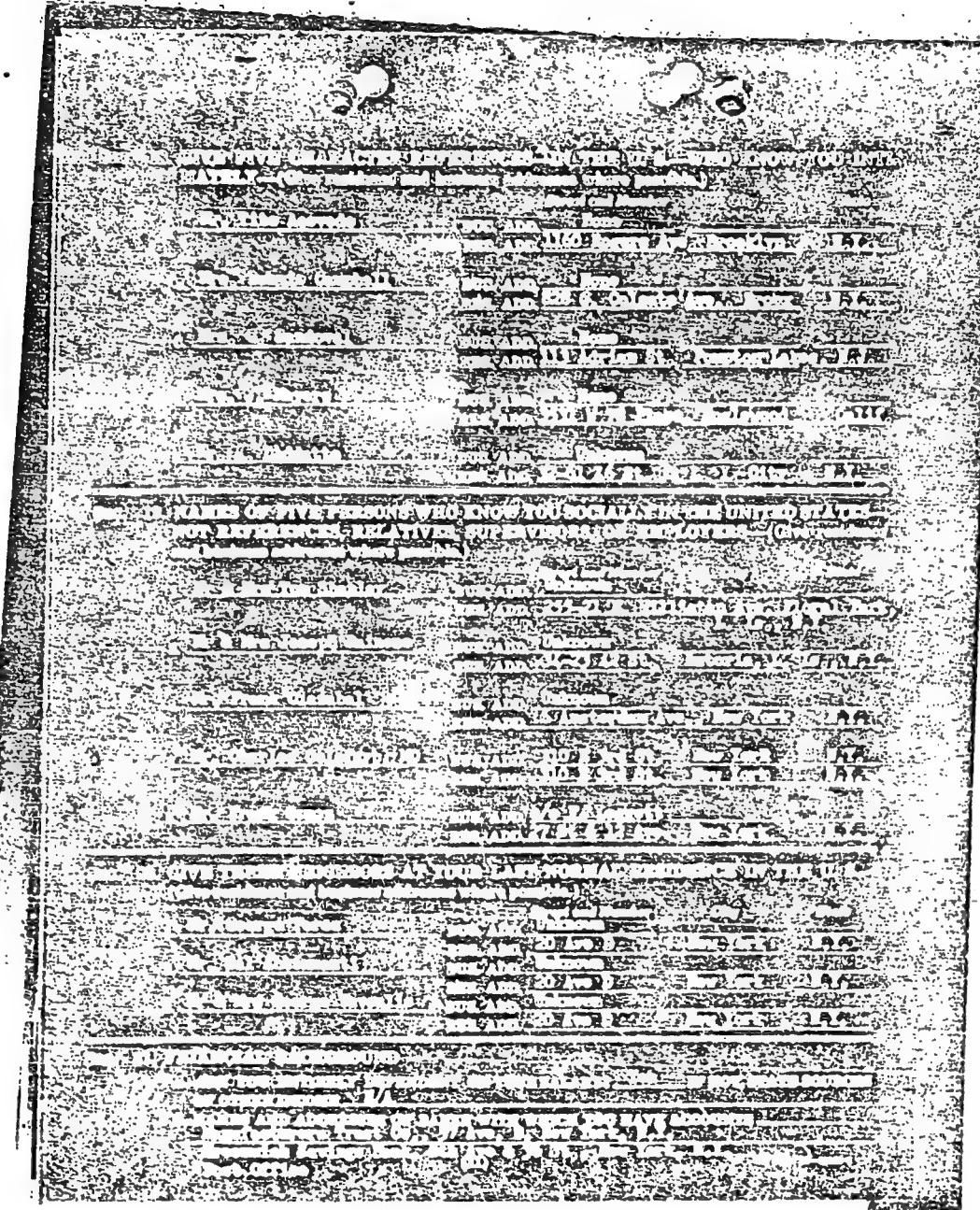


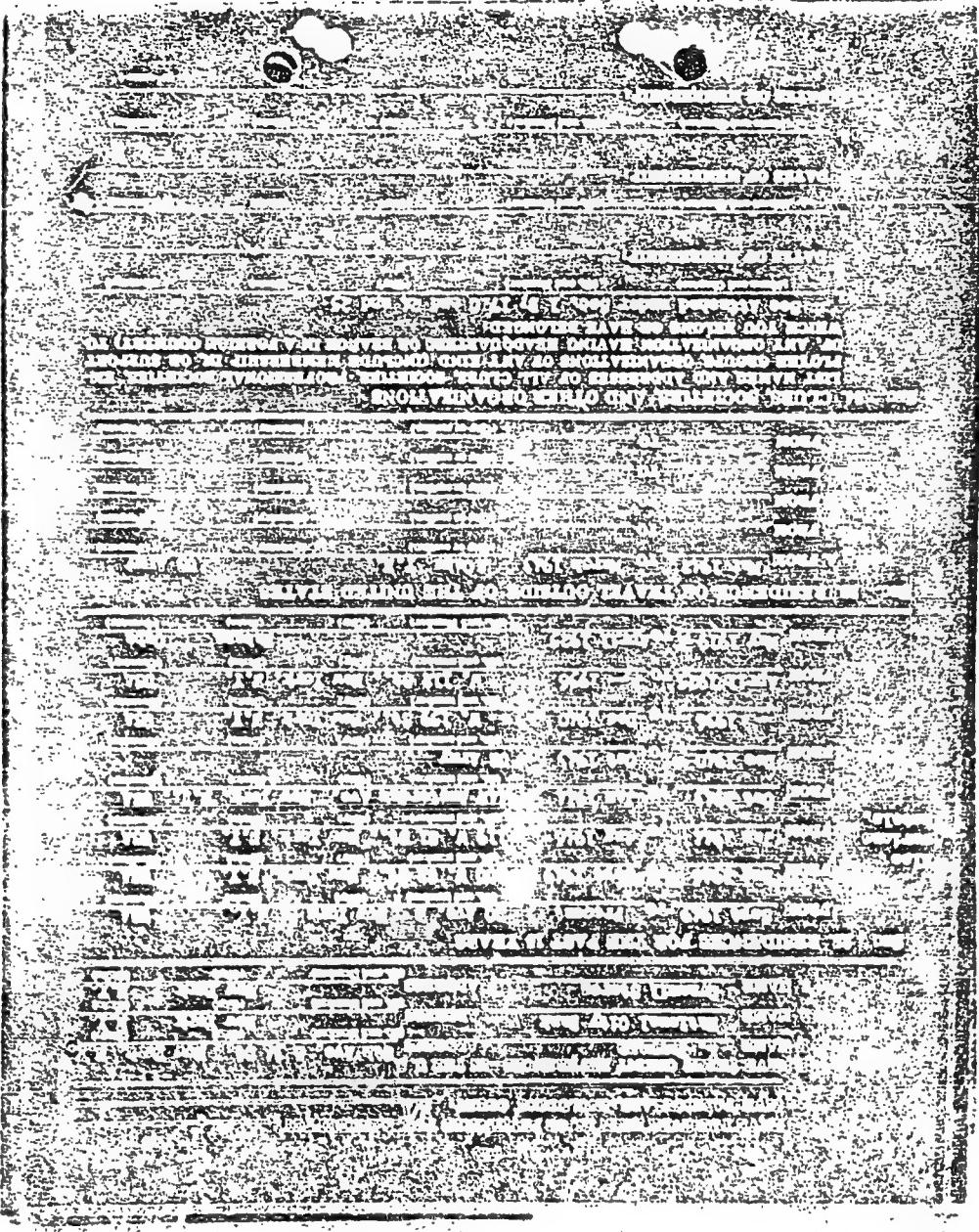






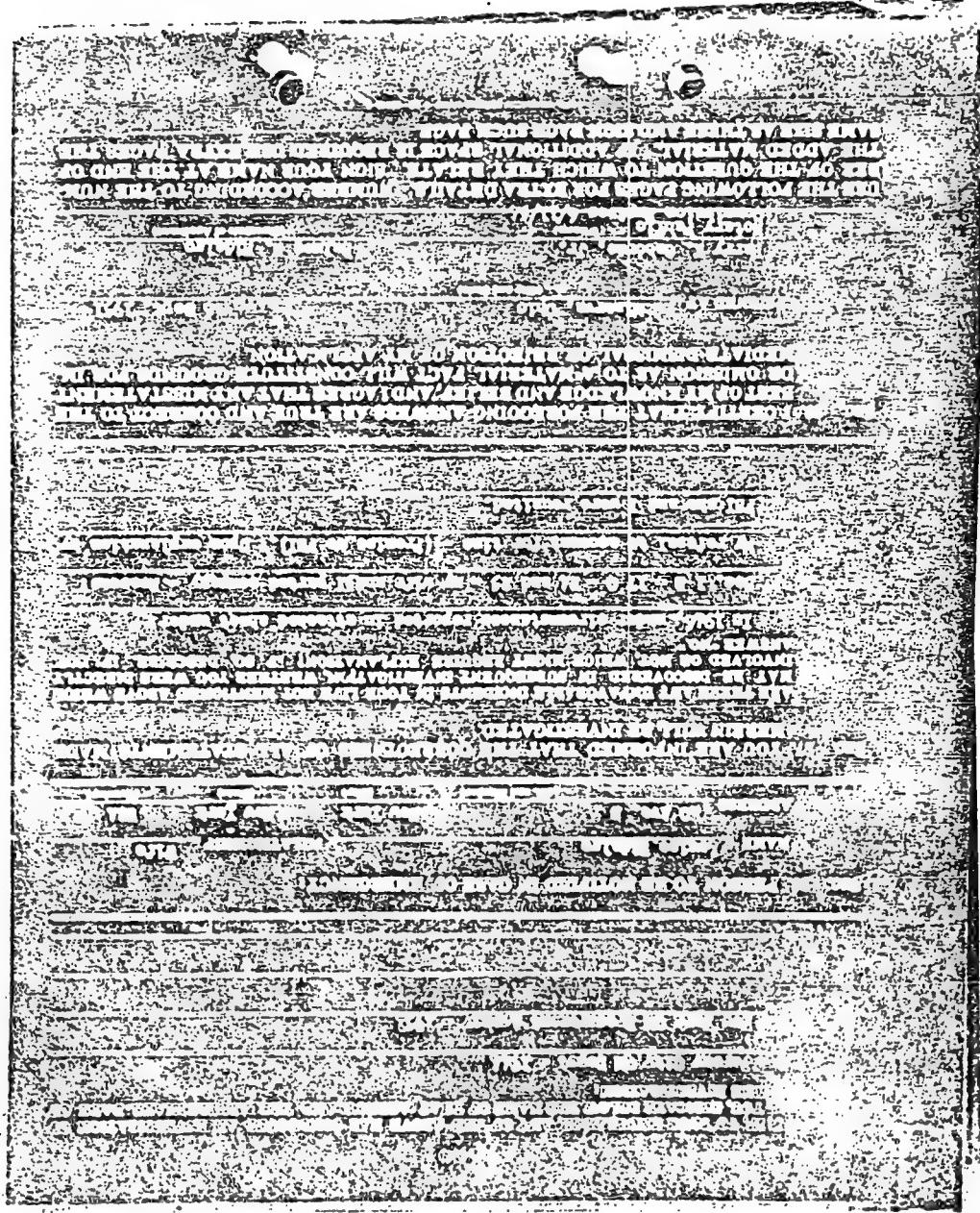






MATTER OF WESTBROOK

RECEIVED  
DOUGLASS & CO.  
ATTORNEYS FOR DEFENDANT  
IN THE MATTER OF THE  
MURDER TRIAL OF JAMES EARL RAY  
AND OTHERS.

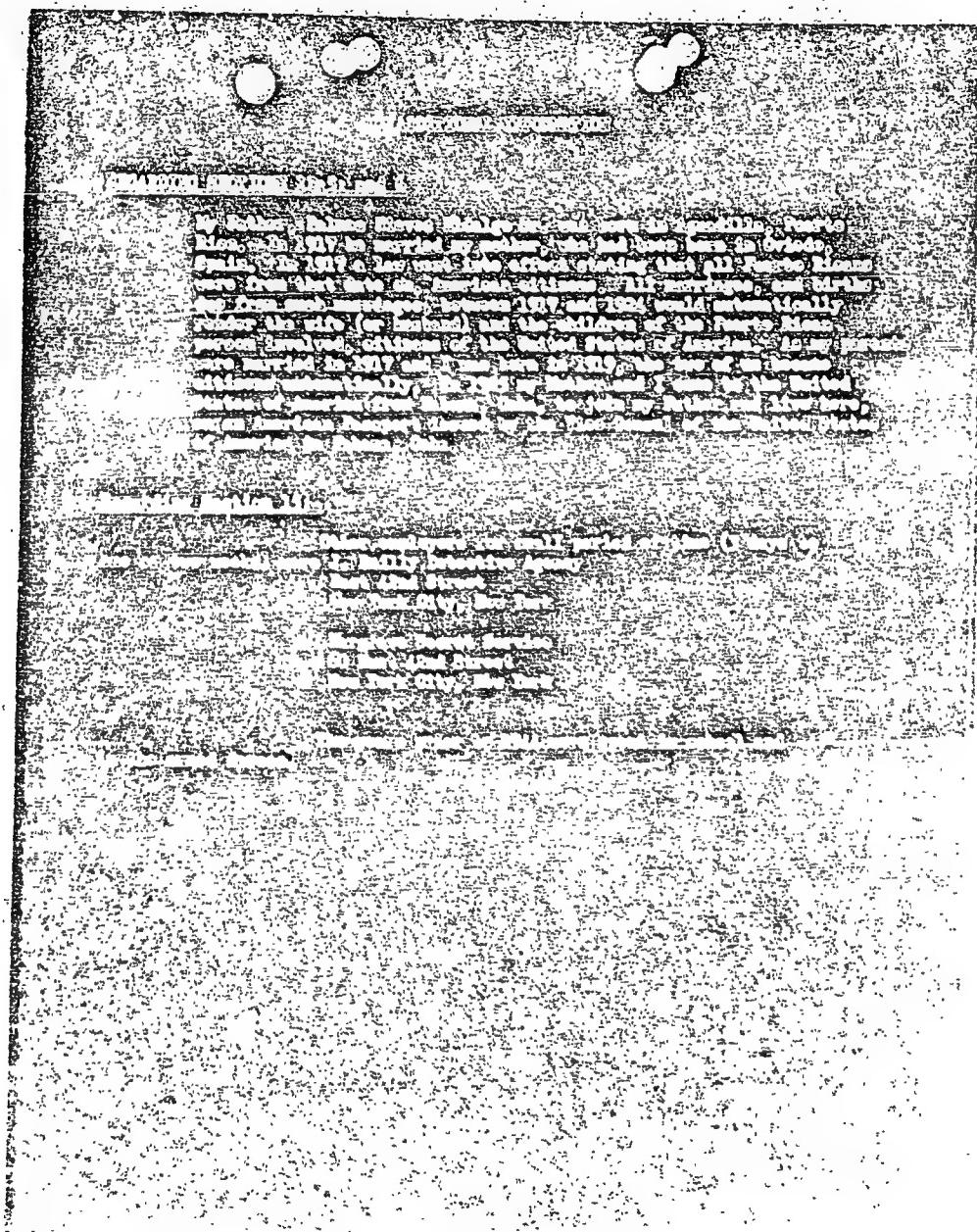


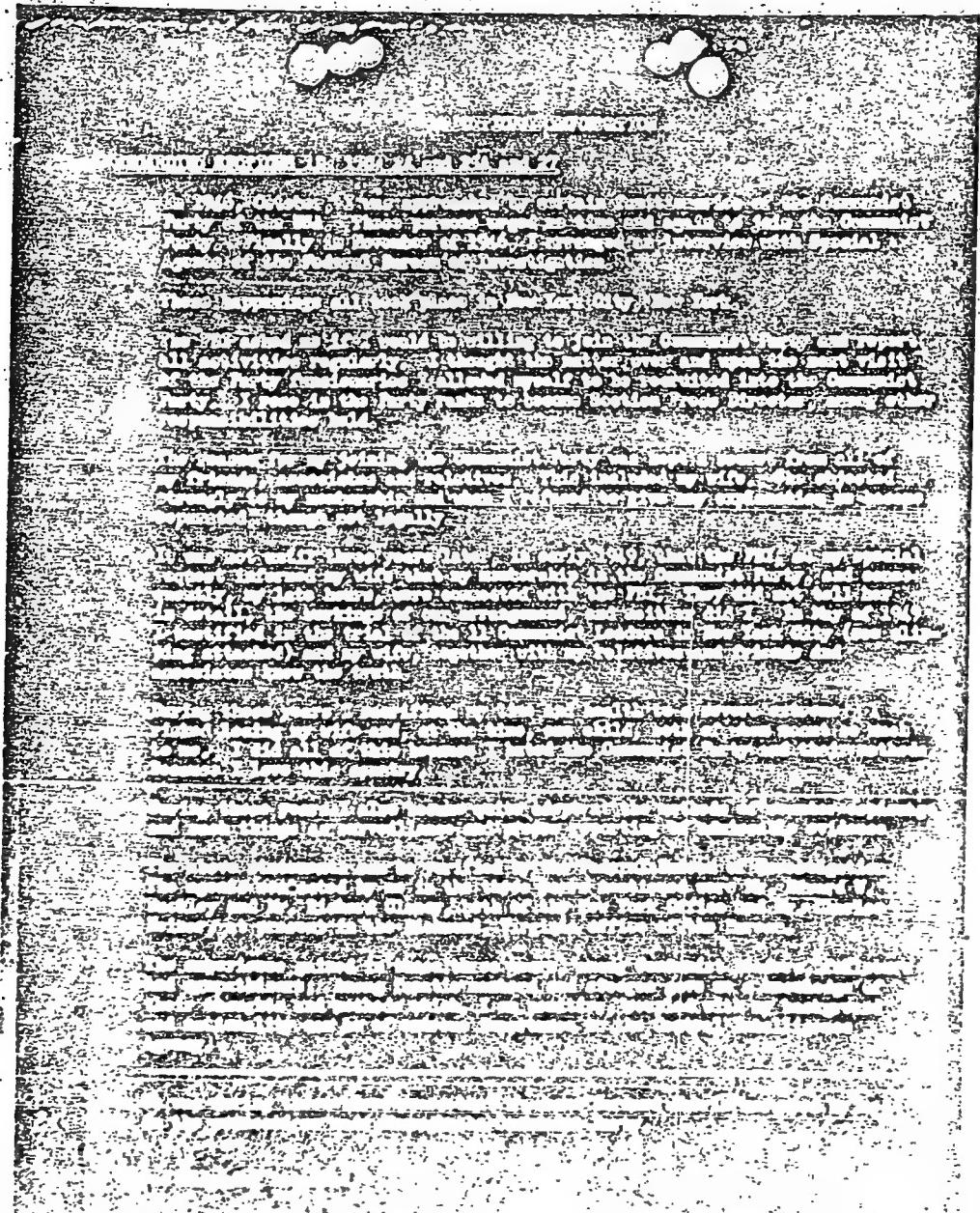
1960-1961  
MAY 1961  
at or through  
Metropolitan  
Mall at  
1111 N.W. 61st

JAN 1970 San Jose, CA  
San Jose, CA  
Santa Barbara, CA

David Davis  
Oscar Davis  
Oscar Davis

Porto Rico  
Porto Rico  
Porto Rico





## PERSONAL HISTORY STATEMENT

- Instructions:**
1. Answer all questions completely. If question is not applicable write "NA." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.
  2. Type, print, or write carefully; illegible or incomplete forms will not receive consideration.

### HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS?

(Yes or No)

#### SEC. 1. PERSONAL BACKGROUND

Telephone:	NA
Office	NA
Ext.	NA
Home	NA

A. FULL NAME M<sub>r.</sub> **JKL**  
(Last, First, Middle)

Ealmos Nieves Sidalgo J.F.A.

(First)

(Middle)

(Last)

PRESENT ADDRESS House number 60, 94th St., East, \_\_\_\_\_  
(St. and Number) (City) (State) (Country)

PERMANENT ADDRESS NA \_\_\_\_\_  
(St. and Number) (City) (State) (Country)

B. NICKNAME "Barney" "Bull" ..... WHAT OTHER NAMES HAVE YOU USED? See remarks

..... UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE  
 NAMES? See remarks

HOW LONG? See remarks IF A LEGAL CHANGE, GIVE PARTICULARS

No \_\_\_\_\_  
(Where) (By what authority)

C. DATE OF BIRTH 27 May 1919. PLACE OF BIRTH Havana, Cuba  
(City) (State) (Country)

D. PRESENT CITIZENSHIP U. S. BY BIRTH? NA BY MARRIAGE? NA  
(Country)

BY NATURALIZATION CERTIFICATE NO. NA ISSUED NA BY NA  
(Date) (Court)

AT See remarks  
(City) (State) (Country)

HAVE YOU HAD A PREVIOUS NATIONALITY? No  
(Yes or No) (Country)

HELD BETWEEN WHAT DATES? NA TO NA ANY OTHER NATIONALITY? NA  
(Country)

GIVE PARTICULARS NA

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? No GIVE PARTICULARS:

NA

(2)

E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? March 1924PORT OF ENTRY: NYC, NY ON PASSPORT OF WHAT COUNTRY? U. S.LAST U. S. VISA None  
(Number) \_\_\_\_\_ (Type) \_\_\_\_\_ (Place of Issue) \_\_\_\_\_ (Date of Issue) \_\_\_\_\_

## SEC. 2. PHYSICAL DESCRIPTION

AGE 38 SEX Male HEIGHT 5' 9 1/2" WEIGHT 145  
 EYES Brown HAIR Dark Brown COMPLEXION Dark SCARS under chin  
 BUILD slight OTHER DISTINGUISHING FEATURES Mole...Upper left lip...

## SEC. 3. MARITAL STATUS

A. SINGLE  MARRIED  DIVORCED  WIDOWED 

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

NAME OF SPOUSE Annie Louise Ecier Hidalgo  
(First) (Middle) (Mother) (Last)PLACE AND DATE OF MARRIAGE Belzoni, Mississippi - 9 April 1943HIS(HER) ADDRESS BEFORE MARRIAGE Rt. 2, Box 76, Belzoni, Mississippi, USA  
(St. and Number) (City) (State) (Country)LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NAPRESENT, OR LAST, ADDRESS Same as applicant  
(St. and Number) (City) (State) (Country)DATE OF BIRTH 15 May 1927 PLACE OF BIRTH Morgan City, Mississippi, USA  
(City) (State) (Country)IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NACITIZENSHIP US WHEN ACQUIRED? Birth WHERE? USA  
(City) (State) (Country)OCCUPATION File Clerk LAST EMPLOYER ClassifiedEMPLOYER'S OR BUSINESS ADDRESS Classified  
(St. and Number) (City) (State) (Country)MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA  
(Date) (Date)COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGNNA

10-42344-1

**SEC. 4. CHILDREN OR DEPENDENTS (Include partial dependents):**

**1. NAME** Ius Maria Hidalgo **RELATIONSHIP** Daughter **AGE** 12  
**CITIZENSHIP** U. S. **ADDRESS** Same as applicant  
 (St. and Number) (City) (State) (Country)

**2. NAME** Frances Rebecka Hidalgo **RELATIONSHIP** Daughter **AGE** 7  
**CITIZENSHIP** U. S. **ADDRESS** Same as applicant  
 (St. and Number) (City) (State) (Country)

**3. NAME** **RELATIONSHIP** AGE  
**CITIZENSHIP** **ADDRESS** (St. and Number) (City) (State) (Country)

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(also dependent)

**SEC. 5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)**

**FULL NAME** Balmero **MIDDLE** N. S. **LAST** Hidalgo  
 (First) (M.I.) (Last)

**LIVING OR DECEASED** Living **DATE OF DECEASE** NA **CAUSE** NA

**PRESENT OR LAST ADDRESS** Same as applicant  
 (St. and Number) (City) (State) (Country)

**DATE OF BIRTH** December 1890 **PLACE OF BIRTH** Aguadilla, Puerto Rico  
 (City) (State) (Country)

**IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY** 1923 (March) NYC, NY  
**CITIZENSHIP** U. S. **WHEN ACQUIRED?** Birth **WHERE?** Puerto Rico  
 (City) (State) (Country)

**OCCUPATION** Retired **LAST EMPLOYER** Do not remember

**EMPLOYER'S OR OWN BUSINESS ADDRESS** None  
 (St. and Number) (City) (State) (Country)

**MILITARY SERVICE FROM** NA **TO** NA **BRANCH OF SERVICE** NA  
 (Date) (Date)

**COUNTRY** NA **DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN**  
 NA

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**SEC. 6. MOTHER (Give the same information for stepmother on a separate sheet)**

**FULL NAME** Frances **MIDDLE** Rosario **LAST** Hidalgo  
 (First) (M.I.) (Last)

**LIVING OR DECEASED** Living **DATE OF DECEASE** NA **CAUSE** NA

**PRESENT OR LAST ADDRESS** Same as applicant  
 (St. and Number) (City) (State) (Country)

**DATE OF BIRTH** 12 Jan. 1892 **PLACE OF BIRTH** Oviedo, Spain  
**CITIZENSHIP** U. S. **WHEN ACQUIRED?** 1917 **WHERE?** Havana, Cuba  
 (City) (State) (Country)

**IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY** March 1924, NYC, NY, USA

(4)

OCCUPATION Retired LAST EMPLOYER Leonid De Luccinskis  
 EMPLOYER'S OR OWN BUSINESS ADDRESS 48 St. NYC, NY  
(St. and Number) (City) (State) (Country)  
 MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA  
 COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN  
NA

## SEC. 7. BROTHERS AND SISTERS (Including half-, step-, and adopted brothers and sisters):

1. FULL NAME ..... (First) (Middle) (Last) AGE .....  
 PRESENT ADDRESS ..... (St. and Number) (City) (State) (Country) (Citizenship)  
 2. FULL NAME ..... (First) (Middle) (Last) AGE .....  
 PRESENT ADDRESS ..... (St. and Number) (City) (State) (Country) (Citizenship)  
 3. FULL NAME ..... (First) (Middle) (Last) AGE .....  
 PRESENT ADDRESS ..... (St. and Number) (City) (State) (Country) (Citizenship)  
 4. FULL NAME ..... (First) (Middle) (Last) AGE .....  
 PRESENT ADDRESS ..... (St. and Number) (City) (State) (Country) (Citizenship)  
 5. FULL NAME ..... (First) (Middle) (Last) AGE .....  
 PRESENT ADDRESS ..... (St. and Number) (City) (State) (Country) (Citizenship)

## SEC. 8. FATHER-IN-LAW

FULL NAME Henry (First) (Middle) (Last) B.  
 LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA  
 PRESENT, OR LAST, ADDRESS 210 California Avenue, Leland, Mississippi, USA  
(St. and Number) (City) (State) (Country)  
 DATE OF BIRTH 1895 PLACE OF BIRTH USA  
 IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA  
 CITIZENSHIP US WHEN ACQUIRED? Birth WHERE? USA  
(City) (State) (Country)  
 OCCUPATION Laborer LAST EMPLOYER Unknown

10-6088-1

**SEC. 9. MOTHER-IN-LAW**

FULL NAME Ella Rebecca Feijo  
 (First) (Middle) (Last)

LIVING OR DECEASED Living ..... DATE OF DECEASE ... NA ..... CAUSE ... NA .....

PRESENT, OR LAST, ADDRESS 210 California Avenue, Leland, Mississippi, USA  
 (St. and Number) (City) (State) (Country)

DATE OF BIRTH 1893 PLACE OF BIRTH USA

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY ..... NA .....

CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? U.S.A.  
 (City) (State) (Country)

OCCUPATION Housewife LAST EMPLOYER NA

**SEC. 10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD  
OR WHO ARE NOT CITIZENS OF THE UNITED STATES:**

See  
remarks

1. NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
2. NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
3. NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	

**SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF  
THE U. S. OR OF A FOREIGN GOVERNMENT:**

NONE	1. NAME	RELATIONSHIP	AGE
	CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
	TYPE AND LOCATION OF SERVICE (IF KNOWN)		
	2. NAME	RELATIONSHIP	AGE
	CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
	TYPE AND LOCATION OF SERVICE (IF KNOWN)		
	3. NAME	RELATIONSHIP	AGE
	CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
	TYPE AND LOCATION OF SERVICE (IF KNOWN)		

(6)

**SEC. 12. POSITION DATA****A. KIND OF POSITION APPLIED FOR** *See covering dispatch reference***B. WHAT IS THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT?** \$590.00 P/A  
*(You Will Not Be Considered For Any Position With A Lower Entrance Salary.)***C. IF YOU ARE WILLING TO TRAVEL, SPECIFY: OCCASIONALLY  Yes  
FREQUENTLY  CONSTANTLY** **D. CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: IN WASHINGTON, D. C.   
ANYWHERE IN THE UNITED STATES , OUTSIDE THE UNITED STATES** **E. IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, SPECIFY LOCATIONS:****SEC. 13. EDUCATION****ELEMENTARY SCHOOL** St. Thomas Apostle ADDRESS NYC (City) NY (State) USA (Country)

DATES ATTENDED 1926-1934 GRADUATE? Yes

**HIGH SCHOOL** La Salle Academy ADDRESS 2nd St., and 2nd Avenue NYC (City) NY (State) USA (Country)

DATES ATTENDED 1936-1940 GRADUATE? Yes

**COLLEGE** NY University ADDRESS Washington Square, NYC, NY, USA  
(City) (State) Two (Night)

MAJOR AND SPECIALTY Business Law YEARS COMPLETED School

DATES ATTENDED 1944-1945 DEGREE No

**COLLEGE** ADDRESS (City) (State) (Country)

MAJOR AND SPECIALTY YEARS COMPLETED

DATES ATTENDED DEGREE

CHIEF UNDERGRADUATE COLLEGE SUBJECTS

CHIEF GRADUATE COLLEGE SUBJECTS

**SEC. 14. ACTIVE U. S. OR FOREIGN MILITARY SERVICE**

U. S. .... Army .... Cpl. .... 1940-1943  
 (Country) (Service) (Rank) (Date of Service)

Camp Hale, Colorado .... 202 19766 .... Honorable  
 (Last Station) (Serial Number) (Type of Discharge)

REMARKS: None

Do not remember  
 SELECTIVE SERVICE BOARD NUMBER ..... ADDRESS .....

IF DEFERRED GIVE REASON ..... NA .....

INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZATIONS ..... NA .....

**SEC. 15. CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 15 YEARS. ACCOUNT FOR ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS OF UNEMPLOYMENT. GIVE ADDRESSES AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. LIST LAST POSITION FIRST. (List all civilian employment by a foreign government, regardless of dates.)**

FROM Feb., 1952 ..... TO Present ..... CLASSIFICATION GRADE ..... GS-11 .....  
 (If in Federal Service)

EMPLOYING FIRM OR AGENCY ..... See covering dispatch reference .....

ADDRESS ..... See covering dispatch reference .....  
 (St. and Number) (City) (State) (Country)

KIND OF BUSINESS U. S. Govt. .... NAME OF SUPERVISOR ..... See covering dispatch

TITLE OF JOB ..... See covering dispatch ..... SALARY \$ 6390.00 ..... PER annum .....

YOUR DUTIES ..... See covering dispatch reference .....

REASONS FOR LEAVING .....

FROM January, 1951 ..... TO February, 1952 ..... CLASSIFICATION GRADE ..... GS-7 .....  
 (If in Federal Service)

EMPLOYING FIRM OR AGENCY ..... NY QM Procurement Agency .....

ADDRESS ..... 111 East 16th Street ..... NYC, NY, USA .....  
 (St. and Number) (City) (State) (Country)

KIND OF BUSINESS U. S. Govt. .... NAME OF SUPERVISOR Do not remember .....

TITLE OF JOB Inspector ..... SALARY \$ 3525.00 ..... PER annum .....

YOUR DUTIES Inspecting material being purchased by U. S. Govt. specifically  
 the U. S. Army .....

REASONS FOR LEAVING To obtain present position .....

(7)

(8)

FROM July 1950 TO January 1951 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY American Trust Company

ADDRESS Wall Street, New York City, NY, USA  
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work

REASONS FOR LEAVING Left for higher paying work

FROM January 1948 TO May 1950 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Colonial Trust Company

ADDRESS 6th Avenue and 45th Street, NYC, NY, USA  
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work

REASONS FOR LEAVING Promised promotion failed to materialize

FROM August 1945 TO September 1947 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Francis H. Leggett Inc.

ADDRESS 28th Street and 12th Avenue, NYC, NY, USA  
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Wholesale NAME OF SUPERVISOR Do not remember  
 Grocery house

TITLE OF JOB Correspondence clerk SALARY \$57.00 PER week

YOUR DUTIES Export correspondence clerical duties

REASONS FOR LEAVING Disatisfied with type of work

10-254-1

SEC. 16. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? GIVE DETAILS:

No \_\_\_\_\_

SEC. 17. GENERAL QUALIFICATIONS

A. FOREIGN LANGUAGES (STATE DEGREE OR PROFICIENCY AS "SLIGHT," "FAIR," OR "FLUENT")

LANGUAGE Spanish ..... SPEAK Fluent ..... READ Fluent ..... WRITE Fluent .....

LANGUAGE Portuguese ..... SPEAK Slight ..... READ Fair ..... WRITE Slight .....

LANGUAGE ..... SPEAK ..... READ ..... WRITE .....

B. LIST ALL SPORTS AND Hobbies WHICH INTEREST YOU; INDICATE DEGREE OF PROFICIENCY IN EACH:

Judo - Have attained "yellow belt" rank .....

Photography - Very good degree of proficiency .....

Bowling - Fair degree of proficiency .....

Philately - Fair degree of proficiency .....

Fishing (no comment) .....

C. HAVE YOU ANY QUALIFICATIONS, AS A RESULT OF TRAINING OR EXPERIENCE, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION?

Yes, See covering dispatch reference.....

D. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT-WAVE RADIO, MULTILITH, COMPTOMETER, KEY PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES:

All photographic devices.....

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING ... 30 ... SHORTHAND ... 0 ...

(10)

E. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION, SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, ETC.

IF YES, INDICATE KIND OF LICENSE AND STATE ..... No.....

FIRST LIC. OR CERTIFICATE (YR) ..... LATEST LIC. OR CERTIFICATE (YR) .....

F. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION  
(SUCH AS: .....

- (1) YOUR MORE IMPORTANT PUBLICATIONS (DO NOT SUBMIT COPIES UNLESS REQUESTED)
- (2) YOUR PATENTS OR INVENTIONS
- (3) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE
- (4) HONORS AND FELLOWSHIPS RECEIVED

NA .....

G. HAVE YOU A PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE  
CONSIDERED IN ASSIGNING YOU TO WORK? IF ANSWER IS "YES," EXPLAIN:

Yes. I must wear glasses continually.....

H. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA  
GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION  
FOR MILITARY OR NAVAL SERVICE? IF ANSWER IS "YES," GIVE COMPLETE DETAILS:

No .....

**SEC. 18. GIVE FIVE CHARACTER REFERENCES—IN THE U. S.—WHO KNOW YOU INTIMATELY—(Give residence and business addresses where possible.)**

	Street and Number	City	State
1. Edward Lee Anderson	BUS. ADD. See Dispatch reference.		
	RES. ADD.		
2. Willard Galbraith	BUS. ADD.	" "	" "
	RES. ADD.		
3. Homer Neal	BUS. ADD.	" "	" "
	RES. ADD.		
4. Andres Rivera	BUS. ADD.	" "	" "
	RES. ADD.		
5. Joseph Sancho	BUS. ADD.	" "	" "
	RES. ADD.		

**SEC. 19. NAMES OF FIVE PERSONS WHO KNOW YOU SOCIALLY IN THE UNITED STATES—NOT REFERENCES, RELATIVES, SUPERVISORS, OR EMPLOYERS—(Give residence and business addresses where possible.)**

	Street and Number	City	State
1. See remarks	BUS. ADD.		
	RES. ADD.		
2. See remarks	BUS. ADD.		
	RES. ADD.		
3. See remarks	BUS. ADD.		
	RES. ADD.		
4. See remarks	BUS. ADD.		
	RES. ADD.		
5. See remarks	BUS. ADD.		
	RES. ADD.		

**SEC. 20. GIVE THREE NEIGHBORS AT YOUR LAST NORMAL RESIDENCE IN THE U. S.—(Give residence and business addresses where possible.)**

	Street and Number	City	State
1. See remarks	BUS. ADD.		
	RES. ADD.		
2. See remarks	BUS. ADD.		
	RES. ADD.		
3. See remarks	BUS. ADD.		
	RES. ADD.		

**SEC. 21. FINANCIAL BACKGROUND**

A. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? Yes... IF NOT, STATE SOURCES OF OTHER INCOME

B. NAMES AND ADDRESSES OF BANKS WITH WHICH YOU HAVE ACCOUNTS Greenwich Savings Bank, 36th St., and Broadway and 6th Avenue, NYC, NY.

(12)

C. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? No  
 GIVE PARTICULARS, INCLUDING COURT: \_\_\_\_\_

D. GIVE THREE CREDIT REFERENCES--IN THE U. S.

1. NAME	None	ADDRESS (St. and Number)	(City)	(State)
2. NAME		ADDRESS (St. and Number)	(City)	(State)
3. NAME		ADDRESS (St. and Number)	(City)	(State)

## SEC. 22. RESIDENCES FOR THE PAST 15 YEARS

FROM April 1952 TO Present	Panama Republic of Panama (St. and number)	(City)	(State)	(Country)
FROM 1949 TO 1952	20 Ave. D., NYC, NY, USA (St. and number)	(City)	(State)	(Country)
FROM 1944 TO 1948	200 West 82nd St., NYC, NY, USA (St. and number)	(City)	(State)	(Country)
FROM TO	(St. and number)	(City)	(State)	(Country)
FROM TO	(St. and number)	(City)	(State)	(Country)
FROM TO	(St. and number)	(City)	(State)	(Country)
FROM TO	(St. and number)	(City)	(State)	(Country)
FROM TO	(St. and number)	(City)	(State)	(Country)

## SEC. 22 RESIDENCE OR TRAVEL OUTSIDE OF THE UNITED STATES

A. FROM 1919 TO 1924	Ravana, Cuba (City or section)	Country of birth (Country)	(Purpose)
FROM 1942 TO 1943	Pacific area (City or section)	US Army (Country)	(Purpose)
FROM 1952 TO Present	Serublic of Panama (City or section)	Work (Country)	(Purpose)
FROM TO	(City or section)	(Country)	(Purpose)
FROM TO	(City or section)	(Country)	(Purpose)

## SEC. 24. CLUBS, SOCIETIES, AND OTHER ORGANIZATIONS

LIST NAMES AND ADDRESSES OF ALL CLUBS, SOCIETIES, PROFESSIONAL SOCIETIES, EMPLOYEE GROUPS, ORGANIZATIONS OF ANY KIND (INCLUDE MEMBERSHIP IN, OR SUPPORT OF, ANY ORGANIZATION HAVING HEADQUARTERS OR BRANCH IN A FOREIGN COUNTRY) TO WHICH YOU BELONG OR HAVE BELONGED:

1. None  
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: \_\_\_\_\_

2. \_\_\_\_\_  
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: \_\_\_\_\_

3. \_\_\_\_\_  
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: \_\_\_\_\_

4. \_\_\_\_\_ (Name and Chapter) \_\_\_\_\_ (St. and Number) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Country)  
**DATES OF MEMBERSHIP:** \_\_\_\_\_
5. \_\_\_\_\_ (Name and Chapter) \_\_\_\_\_ (St. and Number) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Country)  
**DATES OF MEMBERSHIP:** \_\_\_\_\_
6. \_\_\_\_\_ (Name and Chapter) \_\_\_\_\_ (St. and Number) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Country)  
**DATES OF MEMBERSHIP:** \_\_\_\_\_
7. \_\_\_\_\_ (Name and Chapter) \_\_\_\_\_ (St. and Number) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Country)  
**DATES OF MEMBERSHIP:** \_\_\_\_\_

**SEC. 25. MISCELLANEOUS**

A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU SUPPORTED, ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES?

IF "YES," EXPLAIN: NO (See remarks)

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? Yes IF SO, TO WHAT EXTENT? Beer with meals

C. HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE AND DISPOSITION OF CASE:

No

D. HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? IF ANSWER IS "YES," GIVE DETAILS BELOW:

No

E. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940:

Department of Defense

Present Organization

(14)

F. IF, TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:

Federal Bureau of Investigation - 1966

This Organisation - 1952

**SEC. 26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:**

NAME Annie Louise Ridgway RELATIONSHIP wife

**ADDRESS** ... Same as applicant ... City ... State ... Country

SEC. 27. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE  
HEREIN WILL BE INVESTIGATED.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE. IF NOT, ANSWER "NO."

13

SEC. 28. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT Pt. Amador, Canal Zone DATE 19 July 1927

DATE 19 July 1927

*about 1900-1905*

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USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACE IS REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.

14-00000

Section 1A - While an undercover agent for the Federal Bureau of Investigations from 1946 to 1949 I used the name of Bernard Harris to members of the Communist Party of the United States. This information is already on file in this organization.

Section 1D - I became an American citizen at birth through the citizenship of my father. This information is already on file in this organization.

Section 3B - My wife is employed by this organization.

Section 10 - I have many relatives in Spain and Cuba but do not correspond with them and so do not know names, addresses or present status.

Section 18 - All persons mentioned in this section are employees of this organization.

Sections 19

and 20 - Not having lived in the USA for over five years I have lost all contact with old friends, neighbors, etc. I do not know their addresses, status, etc., at this time.

Section 25 - My past connections with any subversive groups and the reasons for such connections is already on file in the files of this organization.

14-00000

RECORD OF  
PREVIOUS GOVERNMENT  
SERVICE RETURNED TO  
FEDERAL RECORDS CENTER IN  
ST. LOUIS, MO.

DATE July 1971